	WILLIAM W. BA	CKUS HOSPITAL			
	TWELVE MONTH	IS ACTUAL FILING			
	FISCAL '	YEAR 2016			
	REPORT 100 - HOSPITAL BA	LANCE SHEET INFO	RMATION		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	%
LINE	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
I.	<u>ASSETS</u>				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$192,740,131	\$48,818,546	(\$143,921,585)	-75%
2	Short Term Investments	\$0	\$0	\$0	0%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$36,077,266	\$37,772,680	\$1,695,414	5%
4	Current Assets Whose Use is Limited for Current Liabilities	\$5,448,010	\$4,642,995	(\$805,015)	-15%
5	Due From Affiliates	\$2,036,239	\$244,966	(\$1,791,273)	-88%
6	Due From Third Party Payers	\$0	\$0	\$0	0%
7	Inventories of Supplies	\$3,621,065	\$3,761,059	\$139,994	4%
8	Prepaid Expenses	\$3,040,704	\$3,293,327	\$252,623	8%
9	Other Current Assets	\$958,264	\$49,423	(\$908,841)	-95%
	Total Current Assets	\$243,921,679	\$98,582,996	(\$145,338,683)	-60%
В.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$21,400,841	\$4,523,690	(\$16,877,151)	-79%
2	Board Designated for Capital Acquisition	\$134,705,505	\$359,376,703	\$224,671,198	167%
3	Funds Held in Escrow	\$0	\$0	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$156,106,346	\$363,900,393	\$207,794,047	133%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$0	\$0	\$0	0%
7	Other Noncurrent Assets	\$13,785,077	\$12,438,939	(\$1,346,138)	-10%
C.	Net Fixed Access.				
	Net Fixed Assets:	\$000.040.007	\$200 04F 00F	\$0.407.040	40/
1	Property, Plant and Equipment	\$306,818,887	\$309,945,935	\$3,127,048	1%
2	Less: Accumulated Depreciation	\$188,485,953	\$200,112,441	\$11,626,488	6% - 7%
	Property, Plant and Equipment, Net	\$118,332,934	\$109,833,494	(\$8,499,440)	-7%
3	Construction in Progress	\$1,246,289	\$4,494,626	\$3,248,337	261%
	Total Net Fixed Assets	\$119,579,223	\$114,328,120	(\$5,251,103)	-4%
	Total Assets	\$533,392,325	\$589,250,448	\$55,858,123	10%

	WILLIAM	I W. BACKUS HOSPITAL						
	TWELVE I	MONTHS ACTUAL FILING						
	FI	SCAL YEAR 2016						
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION								
(1)	(2)	(3) FY 2015	(4) FY 2016	(5) AMOUNT	(6) %			
<u>LINE</u>	DESCRIPTION	<u>ACTUAL</u>	ACTUAL	DIFFERENCE	DIFFERENCE			
II.	LIABILITIES AND NET ASSETS							
	LIABILITIES AND NET ASSETS							
A.	Current Liabilities:							
1	Accounts Payable and Accrued Expenses	\$6,815,141	\$5,601,936	(\$1,213,205)	-18%			
2	Salaries, Wages and Payroll Taxes	\$6,080,822	\$4,123,322	(\$1,957,500)	-32%			
3	Due To Third Party Payers	\$9,211,505	\$6,879,937	(\$2,331,568)	-25%			
4	Due To Affiliates	\$1,676,365	\$5,661,723	\$3,985,358	238%			
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%			
6	Current Portion of Notes Payable	\$399,931	\$432,914	\$32,983	8%			
7	Other Current Liabilities	\$11,943,373	\$9,554,228	(\$2,389,145)	-20%			
	Total Current Liabilities	\$36,127,137	\$32,254,060	(\$3,873,077)	-11%			
В.	Long Term Debt:							
1	Bonds Payable (Net of Current Portion)	\$58,700,068	\$58,700,068	\$0	0%			
2	Notes Payable (Net of Current Portion)	\$9,672,504	\$9,166,147	(\$506,357)	-5%			
	Total Long Term Debt	\$68,372,572	\$67,866,215	(\$506,357)	-1%			
3	Accrued Pension Liability	\$49,998,130	\$60,979,775	\$10,981,645	22%			
4	Other Long Term Liabilities	\$11,817,599	\$11,657,763	(\$159,836)	-1%			
	Total Long Term Liabilities	\$130,188,301	\$140,503,753	\$10,315,452	8%			
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%			
C.	Net Assets:							
1	Unrestricted Net Assets or Equity	\$355,064,529	\$403,758,252	\$48,693,723	14%			
2	Temporarily Restricted Net Assets	\$3,907,265	\$4,543,173	\$635,908	16%			
3	Permanently Restricted Net Assets	\$8,105,093	\$8,191,210	\$86,117	1%			
	Total Net Assets	\$367,076,887	\$416,492,635	\$49,415,748	13%			
	Total Liabilities and Net Assets	\$533,392,325	\$589,250,448	\$55,858,123	10%			

		W. BACKUS HOSPIT							
		ONTHS ACTUAL FIL	LING						
	FISCAL YEAR 2016 REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION								
(1)	(2)	(3)	(4)	(5)	(6)				
(1)	(2)	FY 2015	FY 2016	AMOUNT	%				
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE				
A.	Operating Revenue:								
1	Total Gross Patient Revenue	\$738,603,146	\$788,477,289	\$49,874,143	7%				
2	Less: Allowances	\$440,279,045	\$475,414,888	\$35,135,843	8%				
3	Less: Charity Care	\$4,309,525	\$4,770,269	\$460,744	11%				
4	Less: Other Deductions	\$0	\$0	\$0	0%				
	Total Net Patient Revenue	\$294,014,576	\$308,292,132	\$14,277,556	5%				
5	Provision for Bad Debts	\$8,486,887	\$8,148,488	(\$338,399)	-4%				
	Net Patient Service Revenue less provision for bad debts	\$285,527,689	\$300,143,644	\$14,615,955	5%				
6	Other Operating Revenue	\$6,358,844	\$4,737,171	(\$1,621,673)	-26%				
_	Net Assets Delegand from Destrictions	#247.050	# 507.700	#200 020	4220/				
7	Net Assets Released from Restrictions Total Operating Revenue	\$217,950 \$292,104,483	\$507,782 \$305,388,597	\$289,832 \$13,284,114	133% 5%				
	Total Operating Revenue	\$292,104,463	\$303,366,397	\$13,204,114	376				
В.	Operating Expenses:								
1	Salaries and Wages	\$108,506,446	\$107,459,658	(\$1,046,788)	-1%				
2	Fringe Benefits	\$23,769,984	\$30,312,131	\$6,542,147	28%				
3	Physicians Fees	\$3,109,419	\$3,220,279	\$110,860	4%				
4	Supplies and Drugs	\$39,945,030	\$42,847,762	\$2,902,732	7%				
5	Depreciation and Amortization	\$15,041,302	\$13,878,122	(\$1,163,180)	-8%				
6	Bad Debts	\$0	\$0	\$0	0%				
7	Interest Expense	\$3,380,083	\$3,369,912	(\$10,171)	0%				
8	Malpractice Insurance Cost	\$3,154,911	\$2,185,052	(\$969,859)	-31%				
9	Other Operating Expenses	\$54,247,218	\$65,584,479	\$11,337,261	21%				
	Total Operating Expenses	\$251,154,393	\$268,857,395	\$17,703,002	7%				
	Income/(Loss) From Operations	\$40,950,090	\$36,531,202	(\$4,418,888)	-11%				
C.	Non-Operating Revenue:								
1	Income from Investments	(\$1,452,426)	\$32,330,665	\$33,783,091	-2326%				
2	Gifts, Contributions and Donations	\$166,697	\$137,003	(\$29,694)	-18%				
3	Other Non-Operating Gains/(Losses)	\$56,355	\$15,445	(\$40,910)	-73%				
	Total Non-Operating Revenue	(\$1,229,374)	\$32,483,113	\$33,712,487	-2742%				
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$39,720,716	\$69,014,315	\$29,293,599	74%				
	Other Adjustments:								
	Unrealized Gains/(Losses)	\$404,190	(\$660,123)	(\$1,064,313)	-263%				
	All Other Adjustments	\$0	\$0	\$0	0%				
	Total Other Adjustments	\$404,190	(\$660,123)	(\$1,064,313)	-263%				
	Excess/(Deficiency) of Revenue Over Expenses	\$40,124,906	\$68,354,192	\$28,229,286	70%				
	Principal Payments	\$386,964	\$399,931	\$12,967	3%				

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
I.	GROSS REVENUE BY PAYER				
A.	INPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$115,970,254	\$109,362,454	(\$6,607,800)	-6%
2	MEDICARE MANAGED CARE	\$18,911,093	\$20,615,749	\$1,704,656	9%
3	MEDICAID	\$44,691,115	\$47,665,462	\$2,974,347	7%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$2,468,203	\$2,997,430	\$529,227	21%
6	COMMERCIAL INSURANCE	\$4,194,185	\$2,371,262	(\$1,822,923)	-43%
7	NON-GOVERNMENT MANAGED CARE	\$55,184,438	\$56,619,577	\$1,435,139	3%
8	WORKER'S COMPENSATION	\$2,905,521	\$3,047,022	\$141,501	5%
9	SELF- PAY/UNINSURED	\$2,087,344	\$2,842,924	\$755,580	36%
10	SAGA OTHER	\$0	\$0	\$0 (\$0.40.370)	0%
11	TOTAL INPATIENT GROSS REVENUE	\$2,302,802 \$248,714,955	\$1,353,423	(\$949,379) (\$1,839,652)	-41% -1%
_		\$246,714,955	\$246,875,303	(\$1,039,032)	-170
B .	OUTPATIENT GROSS REVENUE MEDICARE TRADITIONAL	¢127 140 126	\$454.040.404	¢17.677.00E	120/
2	MEDICARE MANAGED CARE	\$137,140,136 \$32,676,546	\$154,818,131 \$38.502.774	\$17,677,995 \$5,826,228	13% 18%
3	MEDICARE MANAGED CARE MEDICAID	\$113,692,625	\$123,803,313	\$10,110,688	9%
4	MEDICAID MANAGED CARE	\$113,092,023	\$123,603,313	\$10,110,088	0%
5	CHAMPUS/TRICARE	\$8,574,168	\$9,186,160	\$611,992	7%
6	COMMERCIAL INSURANCE	\$9,565,485	\$10,479,148	\$913,663	10%
7	NON-GOVERNMENT MANAGED CARE	\$171,030,226	\$184,633,331	\$13,603,105	8%
8	WORKER'S COMPENSATION	\$5,383,585	\$6,045,885	\$662,300	12%
9	SELF- PAY/UNINSURED	\$8,869,175	\$10,508,130	\$1,638,955	18%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$2,956,245	\$3,625,114	\$668,869	23%
	TOTAL OUTPATIENT GROSS REVENUE	\$489,888,191	\$541,601,986	\$51,713,795	11%
			•	•	
C.	TOTAL GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$253,110,390	\$264,180,585	\$11,070,195	4%
2	MEDICARE MANAGED CARE	\$51,587,639	\$59,118,523	\$7,530,884	15%
3		\$158,383,740	\$171,468,775	\$13,085,035	8%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$11,042,371	\$12,183,590	\$1,141,219	10%
6	COMMERCIAL INSURANCE	\$13,759,670	\$12,850,410	(\$909,260)	-7%
7	NON-GOVERNMENT MANAGED CARE	\$226,214,664	\$241,252,908	\$15,038,244	7%
8	WORKER'S COMPENSATION	\$8,289,106	\$9,092,907	\$803,801	10%
9	SELF- PAY/UNINSURED	\$10,956,519	\$13,351,054	\$2,394,535	22%
10		\$0	\$0	\$0	0%
11	OTHER	\$5,259,047	\$4,978,537	(\$280,510)	-5%
	TOTAL GROSS REVENUE	\$738,603,146	\$788,477,289	\$49,874,143	7%
	NET DEVENUE DY DAVED				
II.	NET REVENUE BY PAYER			=	
Α.	INPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$51,455,512	\$48,748,803	(\$2,706,709)	-5%
2	MEDICARE MANAGED CARE	\$8,044,530	\$8,660,245	\$615,715	8%

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
				-	
3	MEDICAID	\$13,444,325	\$13,845,930	\$401,605	3%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$946,468	\$1,202,114	\$255,646	27%
6	COMMERCIAL INSURANCE	\$3,685,257	\$2,007,996	(\$1,677,261)	-46%
7	NON-GOVERNMENT MANAGED CARE	\$41,448,856	\$45,262,246	\$3,813,390	9%
8	WORKER'S COMPENSATION	\$2,495,750	\$2,427,043	(\$68,707)	-3%
9	SELF- PAY/UNINSURED	\$364,512	\$554,029	\$189,517	52%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$564,828	\$448,891	(\$115,937)	-21%
	TOTAL INPATIENT NET REVENUE	\$122,450,038	\$123,157,297	\$707,259	1%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$31,049,066	\$34,659,516	\$3,610,450	12%
2	MEDICARE MANAGED CARE	\$7,459,870	\$8,276,962	\$817,092	11%
3	MEDICAID	\$19,412,267	\$23,912,127	\$4,499,860	23%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$2,307,600	\$2,219,792	(\$87,808)	-4%
6	COMMERCIAL INSURANCE	\$7,500,484	\$7,693,194	\$192,710	3%
7	NON-GOVERNMENT MANAGED CARE	\$99,893,070	\$107,158,720	\$7,265,650	7%
8	WORKER'S COMPENSATION	\$4,390,861	\$3,542,522	(\$848,339)	-19%
9	SELF- PAY/UNINSURED	\$1,431,552	\$1,453,376	\$21,824	2%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$735,727	\$848,955	\$113,228	15%
	TOTAL OUTPATIENT NET REVENUE	\$174,180,497	\$189,765,164	\$15,584,667	9%
	TOTAL NET DEVENUE				
<u>C.</u>	TOTAL NET REVENUE MEDICARE TRADITIONAL	\$82,504,578	\$83,408,319	\$903,741	1%
2	MEDICARE MANAGED CARE	\$15,504,400	\$16,937,207	\$1,432,807	9%
3	MEDICARE MANAGED CARE MEDICAID	\$32,856,592	\$37,758,057	\$4,901,465	15%
4	MEDICAID MEDICAID MANAGED CARE	\$32,636,392	\$37,738,037	\$4,901,465	0%
5	CHAMPUS/TRICARE	\$3,254,068	\$3,421,906	\$167,838	5%
6	COMMERCIAL INSURANCE				
7	NON-GOVERNMENT MANAGED CARE	\$11,185,741 \$141,341,926	\$9,701,190 \$152,420,966	(\$1,484,551) \$11,079,040	-13% 8%
			. , , ,		
8	WORKER'S COMPENSATION SELF- PAY/UNINSURED	\$6,886,611 \$1,796,064	\$5,969,565 \$2,007,405	(\$917,046) \$211,341	-13% 12%
			. , ,	. ,	
10	SAGA OTHER	\$0 \$1,300,555	\$0 \$1,297,846	\$0 (\$2,709)	0% 0%
- 11				· , ,	
	TOTAL NET REVENUE	\$296,630,535	\$312,922,461	\$16,291,926	5%
III.	STATISTICS BY PAYER				
111.	STATISTICS BT FATER				
Α.	DISCHARGES				
1	MEDICARE TRADITIONAL	4,330	4,010	(320)	-7%
2	MEDICARE MANAGED CARE	695	763	68	10%
3	MEDICAID	2,528	2,568	40	2%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	212	239	27	13%
6	COMMERCIAL INSURANCE	144	105	(39)	-27%
7	NON-GOVERNMENT MANAGED CARE	2,614	2,665	51	2%
8	WORKER'S COMPENSATION	93	85	(8)	-9%

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

FY 2016 ACTUAL DIFFERENCE DIFFERENCE	(1)	(2)	(3)	(4)	(5)	(6)
SESCRIPTION SECRIPTION SECRIPTION SELF- PAY/UNINSURED SE		` ,	, ,			• • • • • • • • • • • • • • • • • • • •
SELF-PAY/UNINSURED	LINE	DESCRIPTION				
10 SAGA 0 0 0 0 0 0 0 0 0	LINE	DESCRIPTION	7.07.07.1	710.707.2	5	
10 SAGA 0 0 0 0 0 0 0 0 0	9	SELE- PAY/UNINSURED	89	112	23	26%
11 OTHER 98 60 (38) 3-39%						0%
TOTAL DISCHARGES 10,803 10,607 (196) -22/107			-	•		-39%
B. PATIENT DAYS						-2%
MEDICARE MANAGED CARE 3,511 3,822 311 99/3	B.	PATIENT DAYS	,	,	, ,	
MEDICARE MANAGED CARE 3,511 3,822 311 99/3	1	MEDICARE TRADITIONAL	22,557	20,568	(1,989)	-9%
MEDICAID MANAGED CARE	2	MEDICARE MANAGED CARE		3,822		9%
5 CHAMPUSTRICARE 539 610 71 13% 6 COMMERCIAL INSURANCE 603 365 (238) .39% 7 NON-GOVERNMENT MANAGED CARE 9,521 9,429 (92) .17 8 WORKER'S COMPENSATION 310 249 (61) .20% 9 SELF- PAYJUNINSURED 459 528 69 15% 10 SAGA 0 0 0 0 0 11 OTHER 625 290 (335) .54% TOTAL PATIENT DAYS 47,919 46,555 (1,364) .3% C OUTPATIENT VISITS 1 123,809 129,362 5,553 4% 1 MEDICARE TRADITIONAL 123,809 129,362 5,553 4% 2 MEDICARE MANAGED CARE 17,965 19,941 1,976 11% 4 MEDICAID MANAGED CARE 10,0074 100,774 690 1% 4 MEDICAID MANAGED CARE 7,466 7,378 332 5% 6 COMMERCIAL INSURANCE 7,462 7,193 (269)	3	MEDICAID	9,794	10,694	900	9%
6 COMMERCIAL INSURANCE	4	MEDICAID MANAGED CARE	0	0	0	0%
TONN-GOVERNMENT MANAGED CARE	5	CHAMPUS/TRICARE	539	610	71	13%
B WORKER'S COMPENSATION	6	COMMERCIAL INSURANCE	603	365	(238)	-39%
SELF- PAY/UNINSURED	7	NON-GOVERNMENT MANAGED CARE	9,521	9,429	(92)	-1%
10 SAGA					\ /	-20%
11 OTHER						15%
TOTAL PATIENT DAYS 47,919 46,555 (1,364) -39/				•		0%
C. OUTPATIENT VISITS 123,809 129,362 5,553 4/% MEDICARE TRADITIONAL 123,809 129,362 5,553 4/% MEDICARE MANAGED CARE 17,965 19,941 1,976 11% MEDICAID 100,074 100,764 690 1% MEDICAID 100,074 100,764 690 1% MEDICAID 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	11	-				
MEDICARE TRADITIONAL	_		47,919	46,555	(1,364)	-3%
MEDICARE MANAGED CARE						
MEDICAID						
MEDICAID MANAGED CARE						
CHAMPUS/TRICARE			,	1 -		
6 COMMERCIAL INSURANCE 7,462 7,193 (269) 49% 7 NON-GOVERNMENT MANAGED CARE 162,028 167,396 5,368 39% 8 WORKER'S COMPENSATION 4,285 4,168 (117) -3% 9 SELF- PAY/UNINSURED 7,231 7,775 544 89% 10 SAGA 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0			· ·	-		
Total Outpatient outpatient by Payer Self-Pay/Uninsured Self-Pay/U						
B WORKER'S COMPENSATION 4,285 4,168 (117) -3% SELF- PAY/UNINSURED 7,231 7,775 544 8% 10 SAGA 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0						
SELF-PAY/UNINSURED			,	·	·	
10 SAGA 0 0 0 0 0 0 0 0 0						
11 OTHER			,	,		
TOTAL OUTPATIENT VISITS			-	-	•	
IV. EMERGENCY DEPARTMENT OUTPATIENT BY PAYER EMERGENCY DEPARTMENT OUTPATIENT GROSS A. REVENUE 1 MEDICARE TRADITIONAL 2 MEDICARE MANAGED CARE 35,692,989 \$7,049,146 \$1,356,157 24% 3 MEDICAID 4 MEDICAID \$54,728,713 \$59,913,315 \$5,184,602 9% 4 MEDICAID MANAGED CARE 5 CHAMPUS/TRICARE 6 COMMERCIAL INSURANCE 7 NON-GOVERNMENT MANAGED CARE 8 \$3,814,777 \$4,331,965 \$517,188 14% 7 NON-GOVERNMENT MANAGED CARE 8 \$41,139,146 \$45,633,945 \$4,494,799 111% 8 WORKER'S COMPENSATION 9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 00 11 OTHER 5 \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE EMERGENCY DEPARTMENT OUTPATIENT NET EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE						3%
EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE			,	,	,	
A. REVENUE 1 MEDICARE TRADITIONAL \$31,681,895 \$34,779,776 \$3,097,881 10% 2 MEDICARE MANAGED CARE \$5,692,989 \$7,049,146 \$1,356,157 24% 3 MEDICAID \$54,728,713 \$59,913,315 \$5,184,602 9% 4 MEDICAID MANAGED CARE \$0 \$0 \$0 5 CHAMPUS/TRICARE \$2,880,047 \$3,374,065 \$494,018 17% 6 COMMERCIAL INSURANCE \$3,814,777 \$4,331,965 \$517,188 14% 7 NON-GOVERNMENT MANAGED CARE \$41,139,146 \$45,633,945 \$4,494,799 11% 8 WORKER'S COMPENSATION \$2,116,334 \$2,210,217 \$93,883 4% 9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 \$0 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$1	IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A. REVENUE 1 MEDICARE TRADITIONAL \$31,681,895 \$34,779,776 \$3,097,881 10% 2 MEDICARE MANAGED CARE \$5,692,989 \$7,049,146 \$1,356,157 24% 3 MEDICAID \$54,728,713 \$59,913,315 \$5,184,602 9% 4 MEDICAID MANAGED CARE \$0 \$0 \$0 5 CHAMPUS/TRICARE \$2,880,047 \$3,374,065 \$494,018 17% 6 COMMERCIAL INSURANCE \$3,814,777 \$4,331,965 \$517,188 14% 7 NON-GOVERNMENT MANAGED CARE \$41,139,146 \$45,633,945 \$4,494,799 11% 8 WORKER'S COMPENSATION \$2,116,334 \$2,210,217 \$93,883 4% 9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 \$0 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$1		EMERCENCY DEPARTMENT OUTRATIENT OROCC				
1 MEDICARE TRADITIONAL \$31,681,895 \$34,779,776 \$3,097,881 10% 2 MEDICARE MANAGED CARE \$5,692,989 \$7,049,146 \$1,356,157 24% 3 MEDICAID \$54,728,713 \$59,913,315 \$5,184,602 9% 4 MEDICAID MANAGED CARE \$0 \$0 \$0 0% 5 CHAMPUS/TRICARE \$2,880,047 \$3,374,065 \$494,018 17% 6 COMMERCIAL INSURANCE \$3,814,777 \$4,331,965 \$517,188 14% 7 NON-GOVERNMENT MANAGED CARE \$41,139,146 \$45,633,945 \$4,494,799 11% 8 WORKER'S COMPENSATION \$2,116,334 \$2,210,217 \$93,883 4% 9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT \$149,974,826 \$166,150,796 \$16,175,970						
2 MEDICARE MANAGED CARE \$5,692,989 \$7,049,146 \$1,356,157 24% 3 MEDICAID \$54,728,713 \$59,913,315 \$5,184,602 9% 4 MEDICAID MANAGED CARE \$0 \$0 \$0 0% 5 CHAMPUS/TRICARE \$2,880,047 \$3,374,065 \$494,018 17% 6 COMMERCIAL INSURANCE \$3,814,777 \$4,331,965 \$517,188 14% 7 NON-GOVERNMENT MANAGED CARE \$41,139,146 \$45,633,945 \$4,494,799 11% 8 WORKER'S COMPENSATION \$2,116,334 \$2,210,217 \$93,883 4% 9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 0% 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT NET \$149,974,826 \$166,150,796			Ф04 C04 ООБ	₾04 770 77 0	CO 007 004	400/
3 MEDICAID \$54,728,713 \$59,913,315 \$5,184,602 9% 4 MEDICAID MANAGED CARE \$0						
4 MEDICAID MANAGED CARE \$0 \$0 0% 5 CHAMPUS/TRICARE \$2,880,047 \$3,374,065 \$494,018 17% 6 COMMERCIAL INSURANCE \$3,814,777 \$4,331,965 \$517,188 14% 7 NON-GOVERNMENT MANAGED CARE \$41,139,146 \$45,633,945 \$4,494,799 11% 8 WORKER'S COMPENSATION \$2,116,334 \$2,210,217 \$93,883 4% 9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 0% 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE \$166,150,796 \$16,175,970 11%						
5 CHAMPUS/TRICARE \$2,880,047 \$3,374,065 \$494,018 17% 6 COMMERCIAL INSURANCE \$3,814,777 \$4,331,965 \$517,188 14% 7 NON-GOVERNMENT MANAGED CARE \$41,139,146 \$45,633,945 \$4,494,799 11% 8 WORKER'S COMPENSATION \$2,116,334 \$2,210,217 \$93,883 4% 9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 0% 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE \$166,150,796 \$16,175,970 11%			. , ,		+ - 1 - 1 - 1	
6 COMMERCIAL INSURANCE \$3,814,777 \$4,331,965 \$517,188 14% 7 NON-GOVERNMENT MANAGED CARE \$41,139,146 \$45,633,945 \$4,494,799 11% 8 WORKER'S COMPENSATION \$2,116,334 \$2,210,217 \$93,883 4% 9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 0% 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE \$166,150,796 \$16,175,970 11%						
7 NON-GOVERNMENT MANAGED CARE \$41,139,146 \$45,633,945 \$4,494,799 11% 8 WORKER'S COMPENSATION \$2,116,334 \$2,210,217 \$93,883 4% 9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 \$0 0% 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE						
8 WORKER'S COMPENSATION \$2,116,334 \$2,210,217 \$93,883 4% 9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 0% 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE \$166,150,796 \$16,175,970						
9 SELF- PAY/UNINSURED \$6,256,095 \$7,059,327 \$803,232 13% 10 SAGA \$0 \$0 \$0 0% 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE						4%
10 SAGA \$0 \$0 0% 11 OTHER \$1,664,830 \$1,799,040 \$134,210 8% TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE \$166,150,796 \$16,175,970						13%
TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT NET B. REVENUE	10				\$0	0%
TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE \$149,974,826 \$166,150,796 \$16,175,970 11% EMERGENCY DEPARTMENT OUTPATIENT NET B. REVENUE	11	OTHER	\$1,664,830	\$1,799,040	\$134,210	8%
B. REVENUE		TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
B. REVENUE		GROSS REVENUE	\$149,974,826	\$166,150,796	\$16,175,970	11%
B. REVENUE		EMERGENCY DEPARTMENT OUTPATIENT NET			, ,	
1 MEDICARE TRADITIONAL \$7,265,211 \$7,507,222 \$242,011 3%	B.	REVENUE				
		MEDICARE TRADITIONAL	\$7,265,211	\$7,507,222	\$242,011	3%

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

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
2	MEDICARE MANAGED CARE	\$1,377,879	\$1,536,245	\$158,366	11%
3	MEDICAID	\$10,079,031	\$10,967,586	\$888,555	9%
4	MEDICAID MANAGED CARE	\$0	\$0	\$0	0%
5	CHAMPUS/TRICARE	\$799,873	\$899,964	\$100,091	13%
6	COMMERCIAL INSURANCE	\$3,055,614	\$3,383,107	\$327,493	11%
7	NON-GOVERNMENT MANAGED CARE	\$31,973,262	\$36,818,367	\$4,845,105	15%
8	WORKER'S COMPENSATION	\$1,828,698	\$1,601,877	(\$226,821)	-12%
9	SELF- PAY/UNINSURED	\$1,009,781	\$976,133	(\$33,648)	-3%
10	SAGA	\$0	\$0	\$0	0%
11	OTHER	\$325,881	\$397,760	\$71,879	22%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET				
	REVENUE	\$57,715,230	\$64,088,261	\$6,373,031	11%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	12,023	12,025	2	0%
2	MEDICARE MANAGED CARE	2,107	2,160	53	3%
3	MEDICAID	31,199	29,886	(1,313)	-4%
4	MEDICAID MANAGED CARE	0	0	0	0%
5	CHAMPUS/TRICARE	1,551	1,618	67	4%
6	COMMERCIAL INSURANCE	1,697	1,604	(93)	-5%
7	NON-GOVERNMENT MANAGED CARE	19,542	19,192	(350)	-2%
8	WORKER'S COMPENSATION	1,337	1,232	(105)	-8%
9	SELF- PAY/UNINSURED	3,383	3,466	83	2%
10	SAGA	0	0	0	0%
11	OTHER	538	674	136	25%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT				
	VISITS	73,377	71,857	(1,520)	-2%

REPORT 165 7 of 57 9/19/2017,3:09 PM

FISCAL YEAR 2016

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
I.	OPERATING EXPENSE BY CATEGORY				
	0.1.1.0.11				
A.	Salaries & Wages:	\$26 6E4 940	¢26 047 004	¢466.025	00/
2	Nursing Salaries	\$36,651,849	\$36,817,884	\$166,035	0%
3	Physician Salaries Non-Nursing, Non-Physician Salaries	\$13,820,490 \$58,034,107	\$13,424,880 \$57,216,894	(\$395,610) (\$817,213)	-3% -1%
<u> </u>	Total Salaries & Wages	\$108,506,446	\$107,459,658	(\$1,046,788)	-1%
	Total Galaries & Wages	\$100,300,440	\$107,439,030	(\$1,040,700)	-17
В.	Fringe Benefits:				
1	Nursing Fringe Benefits	\$6,103,468	\$7,858,189	\$1,754,721	29%
2	Physician Fringe Benefits	\$2,650,717	\$2,871,244	\$220,527	8%
3	Non-Nursing, Non-Physician Fringe Benefits	\$15,015,799	\$19,582,698	\$4,566,899	30%
	Total Fringe Benefits	\$23,769,984	\$30,312,131	\$6,542,147	28%
			, , ,		
C.	Contractual Labor Fees:				
1	Nursing Fees	\$842,904	\$947,212	\$104,308	12%
2	Physician Fees	\$3,109,419	\$3,220,279	\$110,860	4%
3	Non-Nursing, Non-Physician Fees	\$4,555,789	\$6,459,325	\$1,903,536	42%
	Total Contractual Labor Fees	\$8,508,112	\$10,626,816	\$2,118,704	25%
D.	Medical Supplies and Pharmaceutical Cost:				
11	Medical Supplies	\$25,236,043	\$27,029,720	\$1,793,677	7%
2	Pharmaceutical Costs	\$14,708,987	\$15,818,042	\$1,109,055	8%
	Total Medical Supplies and Pharmaceutical Cost	\$39,945,030	\$42,847,762	\$2,902,732	7%
<u>E.</u>	Depreciation and Amortization:	A 0.000.500	# 0.040.074	(0500.017)	70
1	Depreciation-Building	\$8,802,588	\$8,218,671	(\$583,917)	-7%
3	Depreciation-Equipment	\$6,187,096	\$5,617,297	(\$569,799)	-9%
3	Amortization Total Depreciation and Amortization	\$51,618 \$15,041,302	\$42,154 \$13,878,122	(\$9,464) (\$1,163,180)	-18%
	Total Depreciation and Amortization	\$13,041,302	\$13,070,122	(\$1,103,100)	-6 /
F.	Bad Debts:				
1	Bad Debts	\$0	\$0	\$0	0%
	Dad Debte	ΨΟ	ΨΟ	ΨΟ	0 //
G.	Interest Expense:				
1	Interest Expense	\$3,380,083	\$3,369,912	(\$10,171)	0%
		, , , , , , , , , , , , , , , , , , ,	+ - , , -	(+ -)	
Н.	Malpractice Insurance Cost:				
1	Malpractice Insurance Cost	\$3,154,911	\$2,185,052	(\$969,859)	-31%
I.	Utilities:				
1	Water	\$317,756	\$409,862	\$92,106	29%
2	Natural Gas	\$1,266,105	\$1,176,748	(\$89,357)	-7%
3	Oil	\$12,664	\$9,776	(\$2,888)	-23%
4	Electricity	\$3,024,095	\$3,025,026	\$931	0%
5	Telephone	\$594,297	\$467,587	(\$126,710)	-21%
6	Other Utilities	\$81,354	\$83,331	\$1,977	2%
	Total Utilities	\$5,296,271	\$5,172,330	(\$123,941)	-2%
	Puoinega Evnengas	+			
J.	Business Expenses:	¢242.000	(\$400.764)	/¢E00.7E0\	4500
<u>1</u>	Accounting Fees Legal Fees	\$342,992 \$763,020	(\$190,761) (\$19,783)	(\$533,753) (\$782,803)	-156% -103%
3	Consulting Fees	\$763,020	\$1,091,196	(\$782,803) \$236,376	-103% 28%
<u> </u>	Dues and Membership	\$634,103	\$520,548	(\$113,555)	-18%
5	Equipment Leases	\$265,515	\$174,702	(\$90,813)	-34%
6	Building Leases	\$2,001,144	\$2,093,660	\$92,516	5%
7	Repairs and Maintenance	\$1,184,327	\$1,514,649	\$330,322	28%
8	Insurance	\$547,039	\$745,505	\$198,466	36%
9	Travel	\$8,846	\$3,584	(\$5,262)	-59%
10	Conferences	\$325,688	\$247,038	(\$78,650)	-24%
	Property Tax	\$208,210	\$222,153	\$13,943	7%

FISCAL YEAR 2016

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
12	General Supplies	\$1,118,267	\$1,075,352	(\$42,915)	-4%
13	Licenses and Subscriptions	\$116,733	\$129,636	\$12,903	11%
14	Postage and Shipping	\$173,071	\$177,665	\$4,594	3%
15	Advertising Corporate parent/system fees	\$32,857	\$22,105	(\$10,752)	-33%
16 17		\$12,723,813	\$21,663,119	\$8,939,306	70%
18	Computer Software Computer hardware & small equipment	\$3,394,278 \$136,269	\$2,272,738 \$213,602	(\$1,121,540) \$77,333	-33% 57%
19	Dietary / Food Services	\$1,404,597	\$1,735,580	\$330,983	24%
20	Lab Fees / Red Cross charges	\$3,841,474	\$4,569,380	\$727,906	19%
21	Billing & Collection / Bank Fees	\$800,737	\$817,169	\$16,432	2%
22	Recruiting / Employee Education & Recognition	\$205,978	\$203,784	(\$2,194)	-1%
23	Laundry / Linen	\$835,345	\$808,996	(\$26,349)	-3%
24	Professional / Physician Fees	\$0	\$0	\$0	0%
25	Waste disposal	\$212,994	\$240,984	\$27,990	13%
26	Purchased Services - Medical	\$3,814,804	\$3,728,646	(\$86,158)	-2%
27	Purchased Services - Non Medical	\$2,208,734	\$3,263,450	\$1,054,716	48%
28	Other Business Expenses	\$5,396,599	\$5,680,915	\$284,316	5%
	Total Business Expenses	\$43,552,254	\$53,005,612	\$9,453,358	22%
	·	, , ,	. , ,	, , ,	
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$0	\$0	\$0	0%
-		7.	7.5	7.7	
	Total Operating Expenses - All Expense Categories*	\$251,154,393	\$268,857,395	\$17,703,002	7%
	1 5 1	, , ,	, , ,	, , ,	
	*AK.The total operating expenses amount above mus	t agree with the to	tal operating expe	nses amount on R	eport 150
	J. J				
II.	OPERATING EXPENSE BY DEPARTMENT				
Α.	General Services:				
1	General Administration	\$37,434,164	\$38,979,661	\$1,545,497	4%
2	General Accounting	\$1,524,642	\$1,184,729	(\$339,913)	-22%
3	Patient Billing & Collection	\$3,085,123	\$3,378,899	\$293,776	10%
4	Admitting / Registration Office	\$2,935,593	\$3,000,772	\$65,179	2%
5	Data Processing	\$10,412,014	\$14,384,701	\$3,972,687	38%
6	Communications	\$0	\$0	\$0	0%
7	Personnel				
		\$26.779.435	\$31.954.032 I	\$5.174.597 I	
8	Public Relations	\$26,779,435 \$113,195	\$31,954,032 \$103.329	\$5,174,597 (\$9,866)	19%
<u>8</u> 9	Public Relations Purchasing	\$113,195	\$103,329	(\$9,866)	19% -9%
	Purchasing		\$103,329 \$998,175	(\$9,866) (\$13,690)	19% -9% -1%
9	Purchasing Dietary and Cafeteria	\$113,195 \$1,011,865 \$3,409,832	\$103,329 \$998,175 \$3,373,079	(\$9,866) (\$13,690) (\$36,753)	19% -9% -1% -1%
9 10	Purchasing	\$113,195 \$1,011,865	\$103,329 \$998,175	(\$9,866) (\$13,690)	19% -9% -1% -1% 8%
9 10 11	Purchasing Dietary and Cafeteria Housekeeping	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681	\$103,329 \$998,175 \$3,373,079 \$3,057,756	(\$9,866) (\$13,690) (\$36,753) \$232,075	19% -9% -1% -1% -1% -3%
9 10 11 12	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957)	19% -9% -1% -1% -1% -1% -1% -1% -1% -1% -1% -1
9 10 11 12 13	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105	19% -9% -1% -1% -1% -1% -1% -1% -1% -1% -1% -1
9 10 11 12 13 14 15	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241	19% -9% -1% -1% -1% -8% -3% -3% -3% -21% -4%
9 10 11 12 13 14 15 16 17	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956	19% -9% -1% -1% -1% -8% -3% -3% -3% -21% -4%
9 10 11 12 13 14 15	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526	19% -9% -1% -1% -1% -1% -1% -1% -1% -1% -1% -1
9 10 11 12 13 14 15 16 17	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526	19% -9% -1% -1% -1% -8% -3% -3% -21% -24% -6%
9 10 11 12 13 14 15 16 17	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526	19% -9% -1% -1% -1% -8% -3% -3% -3% -21% -4% -6% -6% -6%
9 10 11 12 13 14 15 16 17	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584 \$0 \$117,149,666	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110 \$0 \$129,871,371	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526 \$0 \$12,721,705	19% -9% -1% -1% -1% -8% -3% -3% -12% -21% -4% -6% -0% -11%
9 10 11 12 13 14 15 16 17 18	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526	19% -9% -1% -1% -1% -8% -3% -3% -21% -4% -6% -6%
9 10 11 12 13 14 15 16 17 18	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584 \$0 \$117,149,666	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110 \$0 \$129,871,371	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526 \$0 \$12,721,705	19% -9% -1% -1% -1% -8% -3% -3% -1% -2% -11% -14% -14% -0%
9 10 11 12 13 14 15 16 17 18 B. 1	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program Nursing Services Administration	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584 \$0 \$117,149,666 \$963,457 \$0 \$2,609,773	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110 \$0 \$129,871,371 \$828,042 \$0 \$2,177,115	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526 \$0 \$12,721,705 (\$135,415) \$0 (\$432,658)	19% -9% -1% -1% -1% -1% -1% -1% -1% -1% -14% -14
9 10 11 12 13 14 15 16 17 18 B. 1	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584 \$0 \$117,149,666 \$963,457 \$0 \$2,609,773 \$2,924,830	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110 \$0 \$129,871,371	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526 \$0 \$12,721,705 (\$135,415) \$0 (\$432,658) \$388,352	199 -99 -19 -19 -19 -19 -19 -19 -19 -19
9 10 11 12 13 14 15 16 17 18 B. 1 2 3 4	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program Nursing Services Administration Medical Records Social Service	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584 \$0 \$117,149,666 \$963,457 \$0 \$2,609,773 \$2,924,830 \$1,643,321	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110 \$0 \$129,871,371 \$828,042 \$0 \$2,177,115 \$3,313,182 \$1,653,808	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526 \$0 \$12,721,705 (\$135,415) \$0 (\$432,658) \$388,352 \$10,487	19% -9% -1% -1% -1% -1% -1% -1% -1% -1% -1% -1
9 10 11 12 13 14 15 16 17 18 B. 1 2 3	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program Nursing Services Administration Medical Records Social Service Other Professional Services	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584 \$0 \$117,149,666 \$963,457 \$0 \$2,609,773 \$2,924,830 \$1,643,321 \$1,405,643	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110 \$0 \$129,871,371 \$828,042 \$0 \$2,177,115 \$3,313,182 \$1,653,808 \$1,005,209	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526 \$0 \$12,721,705 (\$135,415) \$0 (\$432,658) \$388,352 \$10,487 (\$400,434)	19% -9% -1% -1% -1% -1% -1% -1% -1% -1% -1% -1
9 10 11 12 13 14 15 16 17 18 B. 1 2 3 4	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program Nursing Services Administration Medical Records Social Service	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584 \$0 \$117,149,666 \$963,457 \$0 \$2,609,773 \$2,924,830 \$1,643,321	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110 \$0 \$129,871,371 \$828,042 \$0 \$2,177,115 \$3,313,182 \$1,653,808	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526 \$0 \$12,721,705 (\$135,415) \$0 (\$432,658) \$388,352 \$10,487	19% -9% -1% -1% -1% -8% -3% -3% -12% -21% -4% -6% -0% -11%
9 10 11 12 13 14 15 16 17 18 B. 1 2 3 4	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program Nursing Services Administration Medical Records Social Service Other Professional Services	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584 \$0 \$117,149,666 \$963,457 \$0 \$2,609,773 \$2,924,830 \$1,643,321 \$1,405,643	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110 \$0 \$129,871,371 \$828,042 \$0 \$2,177,115 \$3,313,182 \$1,653,808 \$1,005,209	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526 \$0 \$12,721,705 (\$135,415) \$0 (\$432,658) \$388,352 \$10,487 (\$400,434)	19% -9% -1% -1% -1% -1% -1% -1% -1% -1% -1% -1
9 10 11 12 13 14 15 16 17 18 B. 1 2 3 4	Purchasing Dietary and Cafeteria Housekeeping Laundry & Linen Operation of Plant Security Repairs and Maintenance Central Sterile Supply Pharmacy Department Other General Services Total General Services Professional Services: Medical Care Administration Residency Program Nursing Services Administration Medical Records Social Service Other Professional Services	\$113,195 \$1,011,865 \$3,409,832 \$2,825,681 \$302,360 \$4,518,351 \$1,779,812 \$1,766,641 \$1,455,374 \$17,795,584 \$0 \$117,149,666 \$963,457 \$0 \$2,609,773 \$2,924,830 \$1,643,321 \$1,405,643	\$103,329 \$998,175 \$3,373,079 \$3,057,756 \$293,403 \$4,581,456 \$1,985,057 \$2,130,597 \$1,516,615 \$18,949,110 \$0 \$129,871,371 \$828,042 \$0 \$2,177,115 \$3,313,182 \$1,653,808 \$1,005,209	(\$9,866) (\$13,690) (\$36,753) \$232,075 (\$8,957) \$63,105 \$205,245 \$363,956 \$61,241 \$1,153,526 \$0 \$12,721,705 (\$135,415) \$0 (\$432,658) \$388,352 \$10,487 (\$400,434)	19% -9% -1% -1% -1% -1% -1% -1% -1% -1% -1% -1

FISCAL YEAR 2016

REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	%
LINE	DESCRIPTION	<u>ACTUAL</u>	<u>ACTUAL</u>	DIFFERENCE	DIFFERENCE
		4			
2	Recovery Room	\$1,594,926	\$1,728,592	\$133,666	8%
3	Anesthesiology	\$1,313,264	\$1,347,147	\$33,883	3%
<u>4</u> 5	Delivery Room Diagnostic Radiology	\$0 \$6,424,130	\$0 \$6,483,216	\$0 \$59,086	0% 1%
6	Diagnostic Radiology Diagnostic Ultrasound	\$1,722,340	\$1,644,473	(\$77,867)	-5%
7	Radiation Therapy	\$2,732,126	\$2,710,250	(\$21,876)	-1%
8	Radioisotopes	\$1,190,849	\$1,536,618	\$345,769	29%
9	CT Scan	\$2,309,918	\$2,249,648	(\$60,270)	-3%
10	Laboratory	\$11,054,580	\$11,708,482	\$653,902	6%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$1,385,138	\$1,457,391	\$72,253	5%
13	Electrocardiology	\$147,639	\$7,350	(\$140,289)	-95%
14	Electroencephalography	\$139,050	\$119,111	(\$19,939)	-14%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$1,905,368	\$1,933,544	\$28,176	1%
19	Pulmonary Function	\$0	\$0	\$0 (\$40.207)	0%
20 21	Intravenous Therapy Shock Therapy	\$1,196,450 \$0	\$1,184,053 \$0	(\$12,397) \$0	-1% 0%
22	Psychiatry / Psychology Services	\$2,435,943	\$2,193,961	(\$241,982)	-10%
23	Renal Dialysis	\$570,066	\$428,697	(\$141,369)	-25%
24	Emergency Room	\$19,026,756	\$19,504,065	\$477,309	3%
25	MRI	\$2,727,856	\$2,778,896	\$51,040	2%
26	PET Scan	\$0	\$0	\$0	0%
27	PET/CT Scan	\$540,727	\$516,771	(\$23,956)	-4%
28	Endoscopy	\$1,071,717	\$1,271,821	\$200,104	19%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$333,900	\$291,900	(\$42,000)	-13%
31	Cardiac Catheterization/Rehabilitation	\$1,718,888	\$1,970,144	\$251,256	15%
32	Occupational Therapy / Physical Therapy	\$2,258,164	\$2,547,062	\$288,898	13%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$13,181,564	\$14,506,442	\$1,324,878	10%
	Total Special Services	\$85,935,448	\$89,934,530	\$3,999,082	5%
	Douting Convince:				
D.	Routine Services: Medical & Surgical Units	\$24,146,814	¢04 c00 7c5	¢475.054	20/
<u>1</u> 2	Intensive Care Unit	\$3,270,993	\$24,622,765 \$3,183,054	\$475,951 (\$87,939)	2% -3%
3	Coronary Care Unit	\$3,270,993	\$3,183,034	\$0 \$0	0%
4	Psychiatric Unit	\$2,211,156	\$2,978,458	\$767,302	35%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$4,686,844	\$4,814,598	\$127,754	3%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$0	\$0	\$0	0%
9	Rehabilitation Unit	\$0	\$0	\$0	0%
10	Ambulatory Surgery	\$0	\$0	\$0	0%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$3,513,875	\$3,618,768	\$104,893	3%
13	Other Routine Services	\$692,573	\$856,495	\$163,922	24%
	Total Routine Services	\$38,522,255	\$40,074,138	\$1,551,883	4%
	Other Benedition and				
<u>E.</u>	Other Departments:	*-	*	* •	651
11	Miscellaneous Other Departments	\$0	\$0	\$0	0%
	Total Operating Expenses All Departments*	\$0E4.4E4.000	\$260 0E7 205	¢47 700 000	70/
	Total Operating Expenses - All Departments*	\$251,154,393	\$268,857,395	\$17,703,002	7%
	*A E The total energting expenses amount above	must sares with the	otal anarating a	oncoo omount co	Papart 1F0
	*A E. The total operating expenses amount above	must agree with the t	otal operating exp	enses amount on t	report 130.

	WILLIAM	W. BACKUS HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
(1)	(2)	ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016				
A.	Statement of Operations Summary							
1	Total Net Patient Revenue	\$293,617,939	\$285,527,689	\$300,143,644				
2	Other Operating Revenue	7,047,673	6,576,794	5,244,953				
3	Total Operating Revenue	\$300,665,612	\$292,104,483	\$305,388,597				
4	Total Operating Expenses	252,028,161	251,154,393	268,857,395				
5	Income/(Loss) From Operations	\$48,637,451	\$40,950,090	\$36,531,202				
6	Total Non-Operating Revenue	9,066,264	(825,184)	31,822,990				
7	Excess/(Deficiency) of Revenue Over Expenses	\$57,703,715	\$40,124,906	\$68,354,192				
В.	Profitability Summary							
1	Hospital Operating Margin	15.70%	14.06%	10.83%				
2	Hospital Non Operating Margin	2.93%	-0.28%	9.44%				
3	Hospital Total Margin	18.63%	13.78%	20.27%				
4	Income/(Loss) From Operations	\$48,637,451	\$40,950,090	\$36,531,202				
5	Total Operating Revenue	\$300,665,612	\$292,104,483	\$305,388,597				
6	Total Non-Operating Revenue	\$9,066,264	(\$825,184)	\$31,822,990				
7	Total Revenue	\$309,731,876	\$291,279,299	\$337,211,587				
8	Excess/(Deficiency) of Revenue Over Expenses	\$57,703,715	\$40,124,906	\$68,354,192				
C.	Net Assets Summary							
1	Hospital Unrestricted Net Assets	\$342,576,048	\$355,064,529	\$403,758,252				
2	Hospital Total Net Assets	\$354,463,494	\$367,076,887	\$416,492,635				
3	Hospital Change in Total Net Assets	\$28,990,556	\$12,613,393	\$49,415,748				
4	Hospital Change in Total Net Assets %	108.9%	3.6%	13.5%				

	WILLIA	AM W. BACKUS HOSPITAL						
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
		ACTUAL	ACTUAL	ACTUAL				
<u>LINE</u>	DESCRIPTION	FY 2014	<u>FY 2015</u>	<u>FY 2016</u>				
D.	Cost Data Summary							
1	Ratio of Cost to Charges	0.36	0.34	0.34				
2	Total Operating Expenses	\$252,028,161	\$251,154,393	\$268,857,395				
3	Total Gross Revenue	\$701,705,462	\$738,603,146	\$788,477,289				
4	Total Other Operating Revenue	\$7,047,373	\$6,576,794	\$5,244,953				
5	Private Payment to Cost Ratio	1.81	1.91	1.89				
6	Total Non-Government Payments	\$158,851,096	\$161,210,342	\$170,099,126				
7	Total Uninsured Payments	\$2,184,757	\$1,796,064	\$2,007,405				
8	Total Non-Government Charges	\$256,207,079	\$259,219,959	\$276,547,279				
9	Total Uninsured Charges	\$13,017,856	\$10,956,519	\$13,351,054				
10	Medicare Payment to Cost Ratio	0.97	0.95	0.92				
11	Total Medicare Payments	\$99,158,218	\$98,008,978	\$100,345,526				
12	Total Medicare Charges	\$288,445,183	\$304,698,029	\$323,299,108				
13	Medicaid Payment to Cost Ratio	0.70	0.62	0.65				
14	Total Medicaid Payments	\$35,424,169	\$32,856,592	\$37,758,057				
15	Total Medicaid Charges	\$141,904,568	\$158,383,740	\$171,468,775				
16	Uncompensated Care Cost	\$4,708,339	\$4,285,426	\$4,289,261				
17	Charity Care	\$5,111,796	\$4,033,618	\$4,292,994				
18	Bad Debts	\$8,128,981	\$8,681,323	\$8,369,786				
19	Total Uncompensated Care	\$13,240,777	\$12,714,941	\$12,662,780				
20	Uncompensated Care % of Total Expenses	1.9%	1.7%	1.6%				

	WILLIAM W. BACKUS HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
LINE	DESCRIPTION	FY 2014	<u>FY 2015</u>	FY 2016				
21	Total Operating Expenses	\$252,028,161	\$251,154,393	\$268,857,395				
E.	<u>Liquidity Measures Summary</u>							
1	Current Ratio	6	7	3				
2	Total Current Assets	\$236,054,788	\$243,921,679	\$98,582,996				
3	Total Current Liabilities	\$39,109,069	\$36,127,137	\$32,254,060				
4	Days Cash on Hand	289	298	70				
5	Cash and Cash Equivalents	\$187,018,905	\$192,740,131	\$48,818,546				
6	Short Term Investments	0	0	0				
7	Total Cash and Short Term Investments	\$187,018,905	\$192,740,131	\$48,818,546				
8	Total Operating Expenses	\$252,028,161	\$251,154,393	\$268,857,395				
9	Depreciation Expense	\$15,651,354	\$15,041,302	\$13,878,122				
10	Operating Expenses less Depreciation Expense	\$236,376,807	\$236,113,091	\$254,979,273				
11	Days Revenue in Patient Accounts Receivable	36	34	38				
12	Net Patient Accounts Receivable	\$36,980,052	\$36,077,266	\$37,772,680				
13	Due From Third Party Payers	\$0	\$0	\$0				
14	Due To Third Party Payers	\$8,036,715	\$9,211,505	\$6,879,937				
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$28,943,337	\$26,865,761	\$30,892,743				
16	Total Net Patient Revenue	\$293,617,939	\$285,527,689	\$300,143,644				
17	Average Payment Period	60	56	46				
18	Total Current Liabilities	\$39,109,069	\$36,127,137	\$32,254,060				
19	Total Operating Expenses	\$252,028,161	\$251,154,393	\$268,857,395				
20	Depreciation Expense	\$15,651,354	\$15,041,302	\$13,878,122				

	WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FUNC								
	TWELVE MONTHS ACTUAL FILING								
	FISCAL YEAR 2016								
	REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS								
(1)	(2)	(3)	(4)	(5)					
, ,		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2014	FY 2015	FY 2016					
21	Total Operating Expenses less Depreciation Expense	\$236,376,807	\$236,113,091	\$254,979,273					
F.	Solvency Measures Summary								
1	Equity Financing Ratio	69.0	68.8	70.7					
2	Total Net Assets	\$354,463,494	\$367,076,887	\$416,492,635					
3	Total Assets	\$513,432,879	\$533,392,325	\$589,250,448					
4	Cash Flow to Total Debt Ratio	68.4	52.8	82.1					
5	Excess/(Deficiency) of Revenues Over Expenses	\$57,703,715	\$40,124,906	\$68,354,192					
6	Depreciation Expense	\$15,651,354	\$15,041,302	\$13,878,122					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$73,355,069	\$55,166,208	\$82,232,314					
8	Total Current Liabilities	\$39,109,069	\$36,127,137	\$32,254,060					
9	Total Long Term Debt	\$68,199,710	\$68,372,572	\$67,866,21					
10	Total Current Liabilities and Total Long Term Debt	\$107,308,779	\$104,499,709	\$100,120,275					
11	Long Term Debt to Capitalization Ratio	16.1	15.7	14.0					
12	Total Long Term Debt	\$68,199,710	\$68,372,572	\$67,866,215					
13	Total Net Assets	\$354,463,494	\$367,076,887	\$416,492,635					
14	Total Long Term Debt and Total Net Assets	\$422,663,204	\$435,449,459	\$484,358,850					
15	Debt Service Coverage Ratio	14.1	15.5	22.7					
16	Excess Revenues over Expenses	57,703,715	\$40,124,906	\$68,354,192					
17	Interest Expense	2,992,001	\$3,380,083	\$3,369,912					
18	Depreciation and Amortization Expense	15,651,354	\$15,041,302	\$13,878,122					
19	Principal Payments	2,433,472	\$386,964	\$399,931					
G.	Other Financial Ratios								

	WILLIAM W. BACKUS HOSPITAL							
	TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS							
(4)	(2)	(2)	(4)	(E)				
(1)	(2)	(3)	(4)	(5)				
		ACTUAL	ACTUAL	ACTUAL				
LINE	<u>DESCRIPTION</u>	FY 2014	FY 2015	FY 2016				
20	Average Age of Plant	11.2	12.5	14.4				
21	Accumulated Depreciation	175,263,190	188,485,953	200,112,441				
22	Depreciation and Amortization Expense	15,651,354	15,041,302	13,878,122				
Н.	Utilization Measures Summary							
1	Patient Days	48,840	47,919	46,555				
2	Discharges	10,690	10,803	10,607				
3	ALOS	4.6	4.4	4.4				
	Staffed Beds							
4		201	201	201				
5	Available Beds	-	233	233				
6	Licensed Beds	233	233	233				
7	Occupancy of Staffed Beds	66.6%	65.3%	63.5%				
8	Occupancy of Available Beds	57.4%	56.3%	54.7%				
9	Full Time Equivalent Employees	1,457.0	1,423.5	1,406.9				
I.	Hospital Gross Revenue Payer Mix Percentage							
1	Non-Government Gross Revenue Payer Mix Percentage	34.7%	33.6%	33.4%				
2	Medicare Gross Revenue Payer Mix Percentage	41.1%	41.3%	41.0%				
3	Medicaid Gross Revenue Payer Mix Percentage	20.2%	21.4%	21.7%				
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	0.6%	0.7%	0.6%				
5	Uninsured Gross Revenue Payer Mix Percentage	1.9%	1.5%	1.7%				
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	1.6%	1.5%	1.5%				
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				
8	Non-Government Gross Revenue (Charges)	\$243,189,223	\$248,263,440	\$263,196,225				
9	Medicare Gross Revenue (Charges)	\$288,445,183	\$304,698,029	\$323,299,108				
10	Medicaid Gross Revenue (Charges)	\$141,904,568	\$158,383,740	\$171,468,775				
11	Other Medical Assistance Gross Revenue (Charges)	\$4,069,609	\$5,259,047	\$4,978,537				
12	Uninsured Gross Revenue (Charges)	\$13,017,856	\$10,956,519	\$13,351,054				
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$11,079,023	\$11,042,371	\$12,183,590				
14	Total Gross Revenue (Charges)	\$701,705,462	\$738,603,146	\$788,477,289				
J.	Hospital Net Revenue Payer Mix Percentage							
1	Non-Government Net Revenue Payer Mix Percentage	52.6%	53.7%	53.7%				
2	Medicare Net Revenue Payer Mix Percentage	33.3%	33.0%	32.1%				
3	Medicaid Net Revenue Payer Mix Percentage	11.9%	11.1%	12.1%				
4	Other Medical Assistance Net Revenue Payer Mix Percentage	0.5%	0.4%	0.4%				
5	Uninsured Net Revenue Payer Mix Percentage	0.7%	0.6%	0.6%				
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	1.1%	1.1%	1.1%				
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%				

	WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016												
										REPORT 185 - HOSPITAL FINAI	NCIAL AND STATISTICAL D	ATA ANALYSIS	
													
	(1)	(2)	(3)	(4)	(5)								
			ACTUAL	ACTUAL	ACTUAL								
LINE	DESCRIPTION	FY 2014	<u>FY 2015</u>	<u>FY 2016</u>									
8	Non-Government Net Revenue (Payments)	\$156,666,339	\$159,414,278	\$168,091,721									
9	Medicare Net Revenue (Payments)	\$99,158,218	\$98,008,978	\$100,345,526									
10	Medicaid Net Revenue (Payments)	\$35,424,169	\$32,856,592	\$37,758,057									
11	Other Medical Assistance Net Revenue (Payments)	\$1,468,169	\$1,300,555	\$1,297,846									
12	Uninsured Net Revenue (Payments)	\$2,184,757	\$1,796,064	\$2,007,405									
13	CHAMPUS / TRICARE Net Revenue Payments)	\$3,190,096	\$3,254,068	\$3,421,906									
14	Total Net Revenue (Payments)	\$298,091,748	\$296,630,535	\$312,922,461									
K.	<u>Discharges</u>												
1	Non-Government (Including Self Pay / Uninsured)	3,221	2,940	2,967									
2	Medicare	4,906	5,025	4,773									
3	Medical Assistance	2,346	2,626	2,628									
4	Medicaid	2,282	2,528	2,568									
5	Other Medical Assistance	64	98	60									
6	CHAMPUS / TRICARE	217	212	239									
7	Uninsured (Included In Non-Government)	141	89	112									
8	Total	10,690	10,803	10,607									
L.	Case Mix Index												
1	Non-Government (Including Self Pay / Uninsured)	1.27090	1.32610	1.37250									
2	Medicare	1.45530	1.54320	1.56960									
3	Medical Assistance	1.04967	1.07661	1.08533									
4	Medicaid Other Medical Assistance	1.04050	1.06610	1.07740									
5	Other Medical Assistance	1.37670	1.34780	1.42490									
6	CHAMPUS / TRICARE Uninsured (Included In Non-Government)	0.72920	0.63120 1.08550	0.66520									
7 8	Total Case Mix Index	1.10240 1.29598	1.35280	1.24070 1.3741									
М.	Emergency Department Visits												
1	Emergency Room - Treated and Admitted	6,794	6,553	6,342									
2	Emergency Room - Treated and Discharged	72,087	73,377	71,857									
3	Total Emergency Room Visits	78,881	79,930	71,037									

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

I. M A. A 1 In 2 In 3 O 4 O 5 Di	DESCRIPTION MEDICARE MANAGED CARE ANTHEM - MEDICARE BLUE CONNECTICUT Inpatient Charges Inpatient Payments Dutpatient Charges Dutpatient Payments Discharges Patient Days Dutpatient Visits (Excludes ED Visits)	\$186,218 \$108,393 \$175,173 \$42,874	\$576,947 \$236,873 \$1,335,161 \$265,190	\$390,729 \$128,480 \$1,159,988 \$222,316	% DIFFERENCE 210% 119% 662%
I. M A. A 1 In 2 In 3 O 4 O 5 Di	ANTHEM - MEDICARE BLUE CONNECTICUT Inpatient Charges Inpatient Payments Dutpatient Charges Dutpatient Payments Discharges Datient Days	\$186,218 \$108,393 \$175,173 \$42,874	\$576,947 \$236,873 \$1,335,161 \$265,190	\$390,729 \$128,480 \$1,159,988	210% 119%
A. A 1 In 2 In 3 On 4 On 5 Di	ANTHEM - MEDICARE BLUE CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments Discharges Patient Days	\$108,393 \$175,173 \$42,874 4	\$236,873 \$1,335,161 \$265,190	\$128,480 \$1,159,988	119%
A. A 1 In 2 In 3 On 4 On 5 Di	ANTHEM - MEDICARE BLUE CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments Discharges Patient Days	\$108,393 \$175,173 \$42,874 4	\$236,873 \$1,335,161 \$265,190	\$128,480 \$1,159,988	119%
A. A 1 In 2 In 3 On 4 On 5 Di	ANTHEM - MEDICARE BLUE CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments Discharges Patient Days	\$108,393 \$175,173 \$42,874 4	\$236,873 \$1,335,161 \$265,190	\$128,480 \$1,159,988	119%
1 In 2 In 3 Or 4 Or 5 Di	npatient Charges patient Payments putpatient Charges putpatient Payments pischarges patient Days	\$108,393 \$175,173 \$42,874 4	\$236,873 \$1,335,161 \$265,190	\$128,480 \$1,159,988	119%
1 In 2 In 3 Or 4 Or 5 Di	npatient Charges patient Payments putpatient Charges putpatient Payments pischarges patient Days	\$108,393 \$175,173 \$42,874 4	\$236,873 \$1,335,161 \$265,190	\$128,480 \$1,159,988	119%
2 In 3 O 4 O 5 Di	patient Payments Outpatient Charges Outpatient Payments Oischarges Outpatient Days	\$108,393 \$175,173 \$42,874 4	\$236,873 \$1,335,161 \$265,190	\$128,480 \$1,159,988	119%
3 O 4 O 5 Di	Dutpatient Charges Dutpatient Payments Discharges Patient Days	\$175,173 \$42,874 4	\$1,335,161 \$265,190	\$1,159,988	
4 Oi 5 Di	Outpatient Payments Discharges Patient Days	\$42,874 4	\$265,190		50/%
5 Di	Discharges Patient Days	4	' '	8222 316	
	atient Days		0.4	' '	519%
			21	17	425%
	Outpatient Visits (Excludes ED Visits)	18	134	116	644%
		48	431	383	798%
	mergency Department Outpatient Visits	43	117	74	172%
	mergency Department Inpatient Admissions	3	16	13	433%
	OTAL INPATIENT & OUTPATIENT CHARGES	\$361,391	\$1,912,108	\$1,550,717	429%
TO	OTAL INPATIENT & OUTPATIENT PAYMENTS	\$151,267	\$502,063	\$350,796	232%
B. C	CIGNA HEALTHCARE				1
	npatient Charges	\$0	\$0	\$0	0%
	npatient Charges npatient Payments	\$0	\$0 \$0	\$0 \$0	0%
	Dutpatient Charges	\$0	\$0 \$0	\$0 \$0	0%
	Dutpatient Payments	\$0	\$0 \$0	\$0	0%
	Discharges	0	0	0	0%
	Patient Days	0	0	0	0%
	Dutpatient Visits (Excludes ED Visits)	0	0	0	0%
	mergency Department Outpatient Visits	0	0	0	0%
	mergency Department Outpatient Visits	0	0	0	0%
	OTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$ 0	\$ 0	0%
	OTAL INPATIENT & OUTPATIENT CHARGES OTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0 \$0	\$0 \$0	0%
- 1	OTAL INFATILITY & COTTATILITY FATMLING	90	φυ	φυ	0 70
C. C	CONNECTICARE, INC.				
	npatient Charges	\$12,461,228	\$11,670,172	(\$791,056)	-6%
	patient Payments	\$5,376,370	\$4,985,011	(\$391,359)	-7%
	Outpatient Charges	\$22,917,613	\$23,661,566	\$743,953	3%
	Outpatient Payments	\$5,232,674	\$5,081,638	(\$151,036)	-3%
	Discharges	461	435	(26)	-6%
	Patient Days	2,306	2,077	(229)	-10%
	Outpatient Visits (Excludes ED Visits)	11,935	11,785	(150)	-1%
	mergency Department Outpatient Visits	1,253	1,206	(47)	-4%
	mergency Department Inpatient Admissions	382	349	(33)	-9%
	OTAL INPATIENT & OUTPATIENT CHARGES	\$35,378,841	\$35,331,738	(\$47,103)	0%
	OTAL INPATIENT & OUTPATIENT PAYMENTS	\$10,609,044	\$10,066,649	(\$542,395)	-5%
	•	. , , ,	. ,,-	, , , , , , , , , , , , , , , , , , , ,	

FISCAL YEAR 2016 REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
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%
E.	OTHER MEDICARE MANAGED CARE				
1	Inpatient Charges	\$469,833	\$892,497	\$422,664	90%
2	Inpatient Payments	\$196,504	\$334,848	\$138,344	70%
3	Outpatient Charges	\$611,849	\$457,937	(\$153,912)	-25%
4	Outpatient Payments	\$153,309	\$92,264	(\$61,045)	-40%
5	Discharges	18	31	13	72%
6	Patient Days	109	261	152	139%
7	Outpatient Visits (Excludes ED Visits)	94	57	(37)	-39%
8	Emergency Department Outpatient Visits	106	80	(26)	-25%
9	Emergency Department Inpatient Admissions	12	23	11	92%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,081,682	\$1,350,434	\$268,752	25%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$349,813	\$427,112	\$77,299	22%
		<u> </u>			
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%

FISCAL YEAR 2016 REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
` '		FY 2015	FY 2016	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
G.	UNITED HEALTHCARE INSURANCE COMPANY				
1	Inpatient Charges	\$4,911,432	\$6,314,902	\$1,403,470	29%
2	Inpatient Payments	\$2,013,390	\$2,620,426	\$607,036	30%
3	Outpatient Charges	\$7,797,945	\$11,386,884	\$3,588,939	46%
4	Outpatient Payments	\$1,748,602	\$2,473,435	\$724,833	41%
5	Discharges	182	229	47	26%
6	Patient Days	906	1,120	214	24%
7	Outpatient Visits (Excludes ED Visits)	3,163	4,645	1,482	47%
8	Emergency Department Outpatient Visits	625	658	33	5%
9	Emergency Department Inpatient Admissions	162	176	14	9%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$12,709,377	\$17,701,786	\$4,992,409	39%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$3,761,992	\$5,093,861	\$1,331,869	35%
H.	WELLCARE OF CONNECTICUT				
1	Inpatient Charges	\$51,549	\$74,013	\$22,464	44%
2	Inpatient Payments	\$25,178	\$26,318	\$1,140	5%
3	Outpatient Charges	\$7,021	\$14,211	\$7,190	102%
4	Outpatient Payments	\$1,380	\$2,894	\$1,514	110%
5	Discharges	3	3	0	0%
6	Patient Days	8	18	10	125%
7	Outpatient Visits (Excludes ED Visits)	2	2	0	0%
8	Emergency Department Outpatient Visits	3	3	0	0%
9	Emergency Department Inpatient Admissions	3	3	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$58,570	\$88,224	\$29,654	51%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$26,558	\$29,212	\$2,654	10%
l.	AETNA	****	* * * * * * * * * *	2050.005	200/
1	Inpatient Charges	\$830,833	\$1,081,698	\$250,865	30%
2	Inpatient Payments	\$324,695	\$452,222	\$127,527	39%
3	Outpatient Charges	\$1,164,362	\$1,647,015	\$482,653	41%
4	Outpatient Payments	\$280,390	\$361,541	\$81,151	29%
5	Discharges	27	43	16	59%
6	Patient Days	164	211	47	29%
7	Outpatient Visits (Excludes ED Visits)	616	861	245	40%
8	Emergency Department Outpatient Visits	76	96	20	26%
9	Emergency Department Inpatient Admissions	24	41	17	71%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$1,995,195	\$2,728,713	\$733,518	37%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$605,085	\$813,763	\$208,678	34%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
	, ,	FY 2015	FY 2016	AMÒÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
J.	HUMANA				
11	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
K.	SECURE HORIZONS				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	UNICARE LIFE & HEALTH INSURANCE				
<u>L.</u> 1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Charges Inpatient Payments	\$0	\$0 \$0	\$0	0%
3	Outpatient Charges	\$0	\$0 \$0	\$0	0%
4	Outpatient Charges Outpatient Payments	\$0	7 -	\$0	0%
5	Discharges	50	\$0		0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
					0%
<u>8</u> 9	Emergency Department Outpatient Visits	0	0	0	
9	Emergency Department Inpatient Admissions				0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	<u>\$0</u>	\$0	0% 0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

FISCAL YEAR 2016 REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOÚNT	%
LINE	DESCRIPTION	ACTUAL	ACTUAL	DIFFERENCE	DIFFERENCE
<u>M.</u>	UNIVERSAL AMERICAN	¢o.		# 0	00/
1	Inpatient Charges	\$0	\$0	\$0	0%
3	Inpatient Payments Outpatient Charges	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%
4	Outpatient Charges Outpatient Payments	\$0	\$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	\$0	\$5,520	\$5,520	0%
2	Inpatient Payments	\$0	\$4,547	\$4,547	0%
3	Outpatient Charges	\$2,583	\$0	(\$2,583)	-100%
4	Outpatient Payments	\$641	\$0	(\$641)	-100%
5	Discharges	0	1_	1	0%
6	Patient Days	0	1	1	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	1	0	(1)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,583 \$641	\$5,520 \$4,547	\$2,937 \$3,906	114% 609%
	TOTAL INPATIENT & COTPATIENT PATMENTS	\$041	\$4,547	\$3,900	609%
II.	TOTAL MEDICARE MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$18,911,093	\$20,615,749	\$1,704,656	9%
	TOTAL INPATIENT PAYMENTS	\$8,044,530	\$8,660,245	\$615,715	8%
	TOTAL OUTPATIENT CHARGES	\$32,676,546	\$38,502,774	\$5,826,228	18%
	TOTAL OUTPATIENT PAYMENTS	\$7,459,870	\$8,276,962	\$817,092	11%
	TOTAL DISCHARGES	695	763	68	10%
	TOTAL PATIENT DAYS	3,511	3,822	311	9%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	15,858	17,781	1,923	12%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	2,107	2,160	53	3%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	586	608	22	4%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$51,587,639	\$59,118,523	\$7,530,884	15%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$15,504,400	\$16,937,207	\$1,432,807	9%

REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

A. CCC 1 In 2 In 3 Occ 5 Di 6 Pc 7 Occ 8 Er 9 Er TCC	ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT Inpatient Charges Inpatient Payments Outpatient Charges Outpatient Payments Outpatient Payments Outpatient Days Outpatient Visits (Excludes ED Visits) Imergency Department Outpatient Visits Imergency Department Inpatient Admissions OTAL INPATIENT & OUTPATIENT CHARGES	\$0 \$0 \$0 \$0 \$0 0 0	\$0 \$0 \$0 \$0 \$0 0 0	\$0 \$0 \$0 \$0 \$0 0	% DIFFERENCE 0% 0% 0% 0% 0% 0% 0%
A. CCC 1 In 2 In 3 Occ 5 Di 6 Pc 7 Occ 8 Er 9 Er TCC	ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT Inpatient Charges Inpatient Payments Input patient Payments Inscharges Input patient Payments Inscharges Industrient Days Industrient Visits (Excludes ED Visits) Imergency Department Outpatient Visits Imergency Department Inpatient Admissions	\$0 \$0 \$0 \$0 \$0 0 0	\$0 \$0 \$0 \$0 0 0	\$0 \$0 \$0 \$0 \$0 0	0% 0% 0% 0% 0%
A. CCC 1 In 2 In 3 Occ 5 Di 6 Pc 7 Occ 8 Er 9 Er TCC	ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT Inpatient Charges Inpatient Payments Input patient Payments Inscharges Input patient Payments Inscharges Industrient Days Industrient Visits (Excludes ED Visits) Imergency Department Outpatient Visits Imergency Department Inpatient Admissions	\$0 \$0 \$0 0 0	\$0 \$0 \$0 0	\$0 \$0 \$0 0	0% 0% 0% 0%
A. CCC 1 In 2 In 3 Occ 5 Di 6 Pc 7 Occ 8 Er 9 Er TCC	ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT Inpatient Charges Inpatient Payments Input patient Payments Inscharges Input patient Payments Inscharges Industrient Days Industrient Visits (Excludes ED Visits) Imergency Department Outpatient Visits Imergency Department Inpatient Admissions	\$0 \$0 \$0 0 0	\$0 \$0 \$0 0	\$0 \$0 \$0 0	0% 0% 0% 0%
A. CCC 1 In 2 In 3 Occ 5 Di 6 Pc 7 Occ 8 Er 9 Er TCC	ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT Inpatient Charges Inpatient Payments Input patient Payments Inscharges Input patient Payments Inscharges Industrient Days Industrient Visits (Excludes ED Visits) Imergency Department Outpatient Visits Imergency Department Inpatient Admissions	\$0 \$0 \$0 0 0	\$0 \$0 \$0 0	\$0 \$0 \$0 0	0% 0% 0% 0%
A. CCC 1 In 2 In 3 Occ 5 Di 6 Pc 7 Occ 8 Err 9 Er TCC	connecticut Inpatient Charges Inpatient Payments Inputient Payments Inputient Payments Inscharges Interest Payments Inscharges Interest Payments Interest P	\$0 \$0 \$0 0 0	\$0 \$0 \$0 0	\$0 \$0 \$0 0	0% 0% 0% 0%
A. CCC 1 In 2 In 3 Occ 5 Di 6 Pc 7 Occ 8 Err 9 Er TCC	connecticut Inpatient Charges Inpatient Payments Inputient Payments Inputient Payments Inscharges Interest Payments Inscharges Interest Payments Interest P	\$0 \$0 \$0 0 0	\$0 \$0 \$0 0	\$0 \$0 \$0 0	0% 0% 0% 0%
1 In 2 In 3 Ou 5 Di 6 Pa 7 Ou 8 Er 9 Er TC	npatient Charges npatient Payments putpatient Charges putpatient Payments pischarges ratient Days putpatient Visits (Excludes ED Visits) rmergency Department Outpatient Visits rmergency Department Inpatient Admissions	\$0 \$0 \$0 0 0	\$0 \$0 \$0 0	\$0 \$0 \$0 0	0% 0% 0% 0%
2 In 3 Ou 4 Ou 5 Di 6 Pa 7 Ou 8 Er 9 Er TO	patient Payments Dutpatient Charges Dutpatient Payments Discharges Dutpatient Days Dutpatient Visits (Excludes ED Visits) Imergency Department Outpatient Visits Imergency Department Inpatient Admissions	\$0 \$0 \$0 0 0	\$0 \$0 \$0 0	\$0 \$0 \$0 0	0% 0% 0% 0%
3 Ou 4 Ou 5 Di 6 Pa 7 Ou 8 Er 9 Er TO	Autpatient Charges Outpatient Payments Discharges Datient Days Outpatient Visits (Excludes ED Visits) Imergency Department Outpatient Visits Imergency Department Inpatient Admissions	\$0 \$0 0 0	\$0 \$0 0	\$0 \$0 0	0% 0% 0%
4 Ou 5 Di 6 Pa 7 Ou 8 Er 9 Er TO	Outpatient Payments Discharges Datient Days Outpatient Visits (Excludes ED Visits) Imergency Department Outpatient Visits Imergency Department Inpatient Admissions	\$0 0 0	\$0 0 0	\$0 0	0% 0%
5 Di 6 Pa 7 Ou 8 Er 9 Er TO	Discharges Latient Days Dutpatient Visits (Excludes ED Visits) Imergency Department Outpatient Visits Imergency Department Inpatient Admissions	0 0	0	0	0%
6 Pa 7 Ou 8 Er 9 Er TO	atient Days Dutpatient Visits (Excludes ED Visits) Imergency Department Outpatient Visits Imergency Department Inpatient Admissions	0	0		
7 Ou 8 Er 9 Er TO	Outpatient Visits (Excludes ED Visits) mergency Department Outpatient Visits mergency Department Inpatient Admissions	0		•	0%
8 Er 9 Er TO	mergency Department Outpatient Visits mergency Department Inpatient Admissions			0	0%
9 Er T(mergency Department Inpatient Admissions		0	0	0%
TO		0	0	0	0%
TO		\$0	\$0	\$0	0%
в. с	OTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
в. с		,	* -	* -	
	COMMUNITY HEALTH NETWORK OF CT				
	npatient Charges	\$0	\$0	\$0	0%
	ppatient Payments	\$0	\$0	\$0	0%
	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
	ischarges	0	0	0	0%
6 Pa	atient Days	0	0	0	0%
7 O	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8 Er	mergency Department Outpatient Visits	0	0	0	0%
	mergency Department Inpatient Admissions	0	0	0	0%
	OTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
TO	OTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
l_					
	HEALTHNET OF THE NORTHEAST, INC.	4.			
	patient Charges	\$0	\$0	\$0	0%
	patient Payments	\$0	\$0	\$0	0%
	Outpatient Charges	\$0	\$0	\$0	0%
	Outpatient Payments	\$0	\$0	\$0	0%
	vischarges	0	0	0	0%
	atient Days	0	0	0	0%
	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
	mergency Department Outpatient Visits	0	0	0	0%
	mergency Department Inpatient Admissions	0	0 \$0	0 \$0	0%
	OTAL INPATIENT & OUTPATIENT CHARGES OTAL INPATIENT & OUTPATIENT PAYMENTS	\$0 \$0	\$0 \$0	\$0 \$0	0% 0%

REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	ν-,
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
D.	OTHER MEDICAID MANAGED CARE				
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%
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%
	FIRST CHOICE OF CONNECTICUT, PREFERRED				
F.	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%

REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	AMOUNT	
		ACTUAL	ACTUAL	DIFFERENCE	% DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
G.	UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
	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%
	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%
		7.5			7,7
Н.	AETNA				
	Inpatient Charges	\$0	\$0	\$0	0%
	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%
Ť	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II.	TOTAL MEDICAID MANAGED CARE				
11.					
	TOTAL INPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	TOTAL DISCHARGES	0	0	0	0%
	TOTAL PATIENT DAYS	0	0	0	0%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED				
	VISITS)	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT				
	OUTPATIENT VISITS	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT				
	INPATIENT ADMISSIONS	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

		BACKUS CORPORA	TION						
	TV	WELVE MONTHS ACTU	AL FILING						
		FISCAL YEAR 20	16						
REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION									
(1)	(2)	(3) FY 2015	(4) FY 2016	(5) AMOUNT	(6) %				
LINE	<u>DESCRIPTION</u>	ACTUAL	ACTUAL	<u>DIFFERENCE</u>	DIFFERENCE				
l.	ASSETS								
A.	Current Assets:								
1	Cash and Cash Equivalents	\$193,329,590	\$49,673,821	(\$143,655,769)	-74%				
2	Short Term Investments	\$0	\$0	\$0	0%				
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$37,156,767	\$38,794,756	\$1,637,989	4%				
4	Current Assets Whose Use is Limited for Current Liabilities	\$5,448,010	\$4,642,995	(\$805,015)	-15%				
5	Due From Affiliates	\$2,405,892	\$265.143	(\$2,140,749)	-89%				
6	Due From Third Party Payers	\$0	\$0	\$0	0%				
7	Inventories of Supplies	\$3,621,065	\$3,761,059	\$139,994	4%				
8	Prepaid Expenses	\$3,040,704	\$3,293,327	\$252,623	8%				
9	Other Current Assets	\$972,364	\$60,521	(\$911,843)	-94%				
	Total Current Assets	\$245,974,392	\$100,491,622	(\$145,482,770)	-59%				
В.	Noncurrent Assets Whose Use is Limited:								
1	Held by Trustee	\$21,400,841	\$4,523,690	(\$16,877,151)	-79%				
2	Board Designated for Capital Acquisition	\$134,705,505	\$359,376,703	\$224,671,198	167%				
3	Funds Held in Escrow	\$0	\$0	\$0	0%				
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%				
	Total Noncurrent Assets Whose Use is Limited:	\$156,106,346	\$363,900,393	\$207,794,047	133%				
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%				
6	Long Term Investments	\$0	\$0	\$0	0%				
7	Other Noncurrent Assets	\$14,502,352	\$13,408,031	(\$1,094,321)	-8%				
C.	Net Fixed Assets:								
1	Property, Plant and Equipment	\$308,270,147	\$311,420,848	\$3,150,701	1%				
2	Less: Accumulated Depreciation	\$188,985,410	\$200,871,251	\$11,885,841	\$0				
	Property, Plant and Equipment, Net	\$119,284,737	\$110,549,597	(\$8,735,140)	-7%				
3	Construction in Progress	\$1,246,289	\$4,494,626	\$3,248,337	261%				
	Total Net Fixed Assets	\$120,531,026	\$115,044,223	(\$5,486,803)	-5%				
	Total Assets	\$537,114,116	\$592,844,269	\$55,730,153	10%				

		BACKUS CORPORA	TION						
		TWELVE MONTHS ACTU	AL FILING						
	FISCAL YEAR 2016								
	REPORT 300 - PARENT CORPORATION CONSOLIDATED BALANCE SHEET INFORMATION								
(1)	(2)	(3) FY 2015	(4) FY 2016	(5) AMOUNT	(6) %				
LINE	DESCRIPTION	<u>ACTUAL</u>	ACTUAL	DIFFERENCE	DIFFERENCE				
II.	LIABILITIES AND NET ASSETS								
A.	Current Liabilities:								
1	Accounts Payable and Accrued Expenses	\$6,919,642	\$5,654,300	(\$1,265,342)	-18%				
2	Salaries, Wages and Payroll Taxes	\$6,801,054	\$4,666,866	(\$2,134,188)	-31%				
3	Due To Third Party Payers	\$9,749,411	\$6,879,937	(\$2,869,474)	-29%				
4	Due To Affiliates	\$1,711,676	\$5,752,993	\$4,041,317	236%				
5	Current Portion of Long Term Debt	\$0	\$0	\$0	0%				
6	Current Portion of Notes Payable	\$399,931	\$432,914	\$32,983	8%				
7	Other Current Liabilities	\$11,943,373	\$9,576,183	(\$2,367,190)	-20%				
	Total Current Liabilities	\$37,525,087	\$32,963,193	(\$4,561,894)	-12%				
В.	Long Term Debt:								
1	Bonds Payable (Net of Current Portion)	\$58,700,068	\$58,700,068	\$0	0%				
2	Notes Payable (Net of Current Portion)	\$9,672,504	\$9,166,147	(\$506,357)	-5%				
	Total Long Term Debt	\$68,372,572	\$67,866,215	(\$506,357)	-1%				
3	Accrued Pension Liability	\$49,998,130	\$60,979,775	\$10,981,645	22%				
4	Other Long Term Liabilities	\$12,018,161	\$11,657,763	(\$360,398)	-3%				
	Total Long Term Liabilities	\$130,388,863	\$140,503,753	\$10,114,890	8%				
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%				
C.	Net Assets:								
1	Unrestricted Net Assets or Equity	\$357,187,808	\$406,642,940	\$49,455,132	14%				
2	Temporarily Restricted Net Assets	\$3,907,265	\$4,543,173	\$635,908	16%				
3	Permanently Restricted Net Assets	\$8,105,093	\$8,191,210	\$86,117	19				
	Total Net Assets	\$369,200,166	\$419,377,323	\$50,177,157	14%				
	Total Liabilities and Net Assets	\$537,114,116	\$592,844,269	\$55,730,153	10%				

BACKUS CORPORATION TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 350 - PARENT CORPORATION CONSOLIDATED STATEMENT OF OPERATIONS INFORMATION (1) (2) (6)**AMOUNT** FY 2015 FY 2016 LINE DESCRIPTION **ACTUAL ACTUAL** DIFFERENCE **DIFFERENCE** A. Operating Revenue: 1 Total Gross Patient Revenue \$767,630,825 \$814,390,106 \$46,759,281 6% Less: Allowances \$457,505,869 \$488,987,235 \$31,481,366 7% Less: Charity Care \$4,309,525 \$4,770,269 \$460,744 11% 3 Less: Other Deductions 0% 4 \$0 \$0 \$0 **Total Net Patient Revenue** \$305,815,431 \$320,632,602 \$14,817,171 5% 5 Provision for Bad Debts \$9,296,806 \$8,313,525 (\$983,281)-11% Net Patient Service Revenue less provision for bad debts 5% \$296,518,625 \$312,319,077 \$15,800,452 -27% 6 Other Operating Revenue \$8,308,513 \$6,059,878 (\$2,248,635)Net Assets Released from Restrictions 133% \$507,782 \$289,832 \$217,950 **Total Operating Revenue** \$305.045.088 \$318.886.737 \$13.841.649 5% В. Operating Expenses: -2% 1 Salaries and Wages \$119,561,370 \$117,051,711 (\$2,509,659)2 Fringe Benefits \$32,228,460 \$8,097,060 34% \$24,131,400 \$3,220,279 4% 3 Physicians Fees \$3,109,419 \$110.860 Supplies and Drugs \$40,594,804 \$43,569,997 \$2,975,193 7% 4 -7% Depreciation and Amortization \$15,267,349 \$14,130,746 (\$1,136,603)5 **Bad Debts** 0% 6 \$0 \$0 \$0 0% 7 Interest Expense \$3.380.083 \$3.369.912 (\$10,171)-37% 8 Malpractice Insurance Cost \$3,674,108 \$2,306,595 (\$1,367,513)\$60,565,736 16% Other Operating Expenses \$70,461,841 \$9,896,105 **Total Operating Expenses** \$270,284,269 \$286,339,541 \$16,055,272 6% -6% Income/(Loss) From Operations \$34,760,819 \$32,547,196 (\$2,213,623) C. **Non-Operating Revenue:** 1 Income from Investments \$1,225,618 \$32,349,615 \$31,123,997 2539% Gifts, Contributions and Donations \$137,003 -18% 2 \$166,697 (\$29,694)Other Non-Operating Gains/(Losses) -83% \$55,526 \$9,461 (\$46,065)**Total Non-Operating Revenue** \$1,447,841 \$32,496,079 \$31.048.238 2144% Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments) 80% \$36,208,660 \$65.043.275 \$28.834.615 Other Adjustments: Unrealized Gains/(Losses) \$404,190 (\$660,123)(\$1,064,313)-263% All Other Adjustments 0% \$0 **Total Other Adjustments** \$404,190 (\$660,123)(\$1,064,313) -263%

\$64,383,152

\$27,770,302

76%

\$36,612,850

Excess/(Deficiency) of Revenue Over Expenses

	BACKUS CORI	PORATION							
	TWELVE MONTHS A	ACTUAL FILING							
	FISCAL YEAR 2016 REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS								
(1)	(2)	(4)	(5)						
		ACTUAL	ACTUAL	ACTUAL					
LINE	DESCRIPTION	FY 2014	FY 2015	FY 2016					
A.	Parent Corporation Statement of Operations Summary								
1	Net Patient Revenue	\$309,278,921	\$296,518,625	\$312,319,077					
2	Other Operating Revenue	9,066,949	8,526,463	6,567,660					
3	Total Operating Revenue	\$318,345,870	\$305,045,088	\$318,886,737					
4	Total Operating Expenses	273,896,036	270,284,269	286,339,541					
5	Income/(Loss) From Operations	\$44,449,834	\$34,760,819	\$32,547,196					
6	Total Non-Operating Revenue	11,211,547	1,852,031	31,835,956					
7	Excess/(Deficiency) of Revenue Over Expenses	\$55,661,381	\$36,612,850	\$64,383,152					
В.	Parent Corporation Profitability Summary								
1	Parent Corporation Operating Margin	13.49%	11.33%	9.28%					
2	Parent Corporation Non-Operating Margin	3.40%	0.60%	9.08%					
3	Parent Corporation Total Margin	16.89%	11.93%	18.36%					
4	Income/(Loss) From Operations	\$44,449,834	\$34,760,819	\$32,547,196					
5	Total Operating Revenue	\$318,345,870	\$305,045,088	\$318,886,737					
6	Total Non-Operating Revenue	\$11,211,547	\$1,852,031	\$31,835,956					
7	Total Revenue	\$329,557,417	\$306,897,119	\$350,722,693					
8	Excess/(Deficiency) of Revenue Over Expenses	\$55,661,381	\$36,612,850	\$64,383,152					
C.	Parent Corporation Net Assets Summary								
1	Parent Corporation Unrestricted Net Assets	\$344,915,268	\$357,187,808	\$406,642,940					
2	Parent Corporation Total Net Assets	\$356,802,714	\$369,200,166	\$419,377,323					
3	Parent Corporation Change in Total Net Assets	\$29,497,153	\$12,397,452	\$50,177,157					
4	Parent Corporation Change in Total Net Assets %	109.0%	3.5%	13.6%					

	BACKUS COR	PORATION		
	TWELVE MONTHS	ACTUAL FILING		
	FISCAL YE	AR 2016		
	REPORT 385 - PARENT CORPORATION CON	ISOLIDATED FINANCIAI	L DATA ANALYSIS	
(1)	(2)	(3)	(4)	(5)
(1)	(2)	ACTUAL	ACTUAL	ACTUAL
<u>LINE</u>	DESCRIPTION	FY 2014	FY 2015	FY 2016
D.	Liquidity Measures Summary			
1	Current Ratio	5.78	6.55	3.05
2	Total Current Assets	\$238,871,708	\$245,974,392	\$100,491,622
3	Total Current Liabilities	\$41,294,243	\$37,525,087	\$32,963,193
4	Days Cash on Hand	266	277	67
5	Cash and Cash Equivalents	\$187,885,111	\$193,329,590	\$49,673,821
6	Short Term Investments	\$0	\$0	\$0
7	Total Cash and Short Term Investments	\$187,885,111	\$193,329,590	\$49,673,821
8	Total Operating Expenses	\$273,896,036	\$270,284,269	\$286,339,541
9	Depreciation Expense	\$15,759,885	\$15,267,349	\$14,130,746
10	Operating Expenses less Depreciation Expense	\$258,136,151	\$255,016,920	\$272,208,795
11	Days Revenue in Patient Accounts Receivable	35	34	37
12	Net Patient Accounts Receivable	\$ 38,557,357	\$ 37,156,767	\$ 38,794,756
13	Due From Third Party Payers	\$0	\$0	\$0
14	Due To Third Party Payers	\$8,663,714	\$9,749,411	\$6,879,937
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 29,893,643	\$ 27,407,356	\$ 31,914,819
16	Total Net Patient Revenue	\$309,278,921	\$296,518,625	\$312,319,077
17	Average Payment Period	58	54	44
18	Total Current Liabilities	\$41,294,243	\$37,525,087	\$32,963,193
19	Total Operating Expenses	\$273,896,036	\$270,284,269	\$286,339,541
20	Depreciation Expense	\$15,759,885	\$15,267,349	\$14,130,746
20	Total Operating Expenses less Depreciation Expense	\$258,136,151	\$255,016,920	\$272,208,795

	BACKUS CORPO	-							
	TWELVE MONTHS AC	TUAL FILING							
	FISCAL YEAR 2016								
	REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS								
(1)	(1) (2) (3) (4) (
		ACTUAL	ACTUAL	ACTUAL					
<u>LINE</u>	DESCRIPTION	FY 2014	FY 2015	FY 2016					
E.	Solvency Measures Summary								
1	Equity Financing Ratio	68.8	68.7	70.7					
2	Total Net Assets	\$356,802,714	\$369,200,166	\$419,377,323					
3	Total Assets	\$518,275,686	\$537,114,116	\$592,844,269					
4	Cash Flow to Total Debt Ratio	65.2	49.0	77.9					
5	Excess/(Deficiency) of Revenues Over Expenses	\$55,661,381	\$36,612,850	\$64,383,152					
6	Depreciation Expense	\$15,759,885	\$15,267,349	\$14,130,746					
7	Excess of Revenues Over Expenses and Depreciation Expense	\$71,421,266	\$51,880,199	\$78,513,898					
8	Total Current Liabilities	\$41,294,243	\$37,525,087	\$32,963,193					
9	Total Long Term Debt	\$68,199,710	\$68,372,572	\$67,866,215					
10	Total Current Liabilities and Total Long Term Debt	\$109,493,953	\$105,897,659	\$100,829,408					
11	Long Term Debt to Capitalization Ratio	16.0	15.6	13.9					
12	Total Long Term Debt	\$68,199,710	\$68,372,572	\$67,866,215					
13	Total Net Assets	\$356,802,714	\$369,200,166	\$419,377,323					
14	Total Long Term Debt and Total Net Assets	\$425,002,424	\$437,572,738	\$487,243,538					

				WILLIAN	W. BACKUS HO	SPITAL		
					MONTHS ACTUA			
					ISCAL YEAR 201			
			REPORT 40	0 - HOSPITAL INP			PARTMENT	
(1)	(2)	(3)	(3a)	(3b)	(4)	(5)	(6)	(7)
							OCCUPANCY	OCCUPANCY
		PATIENT	DISCHARGES OR	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	CU/CCU # PATIEN		BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	32,922	7,943	7,937	138	166	65.4%	54.3%
2	ICU/CCU (Excludes Neonatal ICU)	3,140	186	0	12	12	71.7%	71.7%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	5,806	_	722	18	20	88.4%	79.5%
	TOTAL PSYCHIATRIC	5,806	721	722	18	20	88.4%	79.5%
5	Rehabilitation	0	0	0	0	0	0.0%	0.0%
6	Maternity	2,362	967	962	15	15	43.1%	43.1%
7	Newborn	2,325	976	973	18	20	35.4%	31.8%
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	44,230	9,631	9,621	183	213	66.2%	56.9%
	TOTAL INPATIENT BED UTILIZATION	46,555	10,607	10,594	201	233	63.5%	54.7%
		40.555	10.00=	40.504				
	TOTAL INPATIENT REPORTED YEAR	46,555		10,594	201	233	63.5%	54.7%
	TOTAL INPATIENT PRIOR YEAR DIFFERENCE #: REPORTED VS. PRIOR YEAR	47,919 -1,364	10,803 -196	10,781 -187	201 0	233 0	65.3% -1.9%	56.3% -1.6%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-3%	-2%	-2%	0%	0%	-3%	-3%
	Total Licensed Beds and Bassinets	233						
(A) T	his number may not exceed the number of availa	ble beds for eac	h department or in	total.				
Note	: Total discharges do not include ICU/CCU patien	ts.						

		M W. BACKUS HOSPI MONTHS ACTUAL FI			
		ISCAL YEAR 2016	LING		
	REPORT 450 - HOSPITAL INPATIENT AND		R SERVICES UTILI	ZATION AND FTEs	
(1)	(2)	(3)	(4)	(5)	(6)
		AOTHAL	ACTUAL	AMOUNT	0/
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE	% DIFFERENCE
LINE	DESCRIPTION	<u>F1 2015</u>	<u>F1 2010</u>	DIFFERENCE	DIFFERENCE
A.	CT Scans (A)				
	Inpatient Scans	8,127	8,094	-33	0%
	Outpatient Scans (Excluding Emergency Department	44.000	45.000	004	50/
	Scans) Emergency Department Scans	14,982 16,157	15,663 18,406	681 2,249	5% 14%
	Other Non-Hospital Providers' Scans (A)	0,157	16,406	2,249	0%
	Total CT Scans	39,266	42,163	2,897	7%
			,	,	
В.	MRI Scans (A)				
	Inpatient Scans	933	831	-102	-11%
	Outpatient Scans (Excluding Emergency Department	0.000	40.400	070	00/
	Scans) Emergency Department Scans	9,830	10,106 611	276 107	3% 21%
4	Other Non-Hospital Providers' Scans (A)	0	011	0	0%
	Total MRI Scans	11,267	11,548	281	2%
			,		
	PET Scans (A)				
	Inpatient Scans	0	0	0	0%
	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
	Emergency Department Scans	0	0	0	0%
	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
	PET/CT Scans (A)		4	0	000/
1	Inpatient Scans Outpatient Scans (Excluding Emergency Department	6	4	-2	-33%
	Scans)	638	624	-14	-2%
	Emergency Department Scans	0	0	0	0%
	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	644	628	-16	-2%
	(A) If the Hospital is not the primary provider of these	s scans the Hespital	must obtain the fis	cal voar	
	volume of each of these types of scans from the	primary provider of th	ne scans	cai yeai	
	volume of each of these types of souns from the	primary provider or tr	ic souris.		
E.	Linear Accelerator Procedures				
	Inpatient Procedures	383	300	-83	-22%
2	Outpatient Procedures	11,497	9,920	-1,577	-14%
	Total Linear Accelerator Procedures	11,880	10,220	-1,660	-14%
F.	Cardiac Catheterization Procedures				
	Inpatient Procedures	94	65	-29	-31%
	Outpatient Procedures	143	156	13	9%
	Total Cardiac Catheterization Procedures	237	221	-16	-7%
	Cardiac Angioplasty Procedures		_		
	Primary Procedures Elective Procedures	0	0	0	0% 0%
	Total Cardiac Angioplasty Procedures	0	0	0	0%
					0 70
H.	Electrophysiology Studies				
1	Inpatient Studies	30	26	-4	-13%
2	Outpatient Studies	78	105	27	35%
	Total Electrophysiology Studies	108	131	23	21%
I.	Surgical Procedures				
	Inpatient Surgical Procedures	2,365	2,214	-151	-6%
	Outpatient Surgical Procedures	6,427	6,334	-93	-1%
	Total Surgical Procedures	8,792	8,548	-244	-3%
	Factor Davidson				
	Endoscopy Procedures	505	F0.1	00	701
	Inpatient Endoscopy Procedures	525	561	36	7%

		M W. BACKUS HOSPIT MONTHS ACTUAL FIL			
		FISCAL YEAR 2016	LING		
			D 050\/(050 HTH I	ZATIONI AND ETC.	
	REPORT 450 - HOSPITAL INPATIENT AN	D OUTPATIENT OTHER	R SERVICES UTILIA	ZATION AND FIES	
/4\	(0)	(2)	(4)	(5)	(c)
(1)	(2)	(3)	(4)	(5)	(6)
		4071141	4071141	444611117	0.4
	DESCRIPTION	ACTUAL	ACTUAL	AMOUNT	% DIFFERENCE
LINE	DESCRIPTION	FY 2015	FY 2016	<u>DIFFERENCE</u>	DIFFERENCE
2	Outpatient Endeagony Procedures	2.514	2.025	411	1.00
	Outpatient Endoscopy Procedures Total Endoscopy Procedures	2,514 3.039	2,925 3.486	411	169 15 9
	Total Elidoscopy Procedures	3,039	3,400	447	137
K.	Hospital Emergency Room Visits				
1	Emergency Room Visits: Treated and Admitted	6,553	6,342	-211	-3%
2	Emergency Room Visits: Treated and Discharged	73,377	71,857	-1,520	-37 -2%
	Total Emergency Room Visits	79,930	71,037 78,199	-1,320 -1,731	-2%
	Total Emergency Room Viole	10,000	70,100	1,701	
L.	Hospital Clinic Visits				
1	Substance Abuse Treatment Clinic Visits	0	0	0	09
2	Dental Clinic Visits	0	0	0	00
3	Psychiatric Clinic Visits	15,373	13,829	-1,544	-109
4	Medical Clinic Visits	0	0	0	00
5	Medical Clinic Visits - Pediatric Clinic	0	0	0	09
6	Medical Clinic Visits - Urgent Care Clinic	0	0	0	09
7	Medical Clinic Visits - Family Practice Clinic	0	0	0	09
8	Medical Clinic Visits - Other Medical Clinics	0	0	0	09
9	Specialty Clinic Visits	0	0	0	09
10	Specialty Clinic Visits - Cardiac Clinic	0	0	0	09
11	Specialty Clinic Visits - Chronic Pain Clinic	1,877	1,592	-285	-159
12	Specialty Clinic Visits - OB-GYN Clinic	0	0	0	09
13	Specialty Clinic Visits - Other Speciality Clinics	45,278	45,419	141	09
	Total Hospital Clinic Visits	62,528	60,840	-1,688	-39
M.	Other Hospital Outpatient Visits				
1	Rehabilitation (PT/OT/ST)	25,602	26,643	1,041	49
2	Cardiac Rehabilitation	5,133	5,466	333	69
3	Chemotherapy	2,871	2,822	-49	-29
4	Gastroenterology	0	0	0	09
5	Other Outpatient Visits	198,902	212,516	13,614	79
	Total Other Hospital Outpatient Visits	232,508	247,447	14,939	69
N.	Hospital Full Time Equivalent Employees				
1	Total Nursing FTEs	398.0	390.7	-7.3	-29
2	Total Physician FTEs	44.3	42.6	-1.7	-4°
3	Total Non-Nursing and Non-Physician FTEs	981.2	973.6	-7.6	-19
	Total Hospital Full Time Equivalent Employees	1.423.5	1,406.9	-16.6	-19
		,	, -		
					·

		CKUS HOSPITAL			
	TWELVE MONTH		G		
		'EAR 2016			
RE	PORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDO	SCOPY AND EMI	ERGENCY RO	OM SERVICES E	BY LOCATION
(1)	(2)	(3)	(4)	(5)	(6)
(')	(2)	(3)	(7)	(0)	(0)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	<u>DESCRIPTION</u>	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
Α.	Outpatient Surgical Procedures				
1	BACKUS HOSPITAL	6,427	6,334	-93	-1%
	Total Outpatient Surgical Procedures(A)	6,427	6,334	-93	-1%
В.	Outpatient Endoscopy Procedures				
1	BACKUS HOSPITAL	2,514	2,925	411	16%
	Total Outpatient Endoscopy Procedures(B)	2,514	2,925	411	16%
C.	Outpatient Hospital Emergency Room Visits				
1	BACKUS HOSPITAL	51,181	50,018	-1,163	-2%
2	BACKUS PLAINFIELD EMERGENCY DPT	22,196	21,839	-357	-2%
	Total Outpatient Hospital Emergency Room Visits(C)	73,377	71,857	-1,520	-2%
	(A) Must agree with Total Outpatient Surgical Procedure	es on Report 450).		
	(B) Must agree with Total Outpatient Endoscopy Proced	lures on Report	450.		
	(C) Must agree with Emergency Room Visits Treated an	d Discharged on	Poport 450		
	(C) must agree with Emergency Room visits freated an	u Discharged on	i Neport 450.		

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING **FISCAL YEAR 2016** REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL ACTUAL AMOUNT** % LINE DESCRIPTION FY 2015 FY 2016 **DIFFERENCE DIFFERENCE** DATA BY MAJOR PAYER CATEGORY A. MEDICARE MEDICARE INPATIENT -4% INPATIENT ACCRUED CHARGES \$134,881,347 \$129,978,203 (\$4,903,144) INPATIENT ACCRUED PAYMENTS (IP PMT) \$59.500.042 \$57,409,048 (\$2,090,994) -4% 0% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 44.17% 0.06% 44.11% 4 DISCHARGES -5% 4.773 5.025 (252) 5 CASE MIX INDEX (CMI) 1.54320 1.56960 0.02640 2% 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 7,754.58000 7,491.70080 (262.87920) -3% 7 INPATIENT ACCRUED PAYMENT / CMAD \$7,672.89 \$7,663.02 (\$9.87)0% 8 PATIENT DAYS 24,390 -6% (1,678) 26,068 9 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$2,282.49 \$2,353.79 \$71.30 3% 10 AVERAGE LENGTH OF STAY -1% 5.1 (0.1)MEDICARE OUTPATIENT OUTPATIENT ACCRUED CHARGES (OP CHGS) 14% 11 \$169.816.682 \$193.320.905 \$23.504.223 \$4,427,542 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$38,508,936 \$42,936,478 11% 12 13 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 22.68% 22.21% -0.47% -2% 14 OUTPATIENT CHARGES / INPATIENT CHARGES 125.90% 148.73% 22.83% 18% 15 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 6,326.51472 7,099.04167 772.52695 12% 16 OUTPATIENT ACCRUED PAYMENTS / OPED \$6,086.91 \$6.048.21 (\$38.70)-1% MEDICARE TOTALS (INPATIENT + OUTPATIENT) 6% TOTAL ACCRUED CHARGES \$304,698,029 \$323,299,108 \$18,601,079 18 TOTAL ACCRUED PAYMENTS \$98,008,978 \$100,345,526 \$2,336,548 2% TOTAL ALLOWANCES 19 \$206,689,051 \$222,953,582 \$16,264,531 8%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS ACTUAL ACTUAL AMOUNT % LINE DESCRIPTION FY 2015 FY 2016 **DIFFERENCE DIFFERENCE** B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) NON-GOVERNMENT INPATIENT INPATIENT ACCRUED CHARGES \$64,371,488 \$64.880.785 1% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$47,994,375 \$50,251,314 \$2,256,939 5% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 74.56% 77.45% 2.89% 4% 4 DISCHARGES 1% 2.940 2.967 27 3% 5 CASE MIX INDEX (CMI) 1.32610 0.04640 1.37250 CASE MIX ADJUSTED DISCHARGES (CMAD) 3,898.73400 4,072.20750 173.47350 4% 6 INPATIENT ACCRUED PAYMENT / CMAD 0% \$12,310.25 \$12,340.07 \$29.82 8 MEDICARE - NON-GOVERNMENT IP PMT / CMAD (\$4,637.36) (\$4,677.05) (\$39.69)1% 9 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT (\$18,079,817) (\$19,045,909) (\$966,093)5% -3% 10 PATIENT DAYS 10,893 10.571 (322)11 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$4,405.98 \$4,753.70 \$347.71 8% AVERAGE LENGTH OF STAY -4% 12 3.6 (0.1)NON-GOVERNMENT OUTPATIENT 9% 13 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$194,848,471 \$16,818,023 \$211,666,494 14 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$113,215,967 \$119,847,812 \$6,631,845 6% 15 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 58.10% 56.62% -1.48% -3% 16 OUTPATIENT CHARGES / INPATIENT CHARGES 302.69% 326.24% 23.55% 8% 17 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 8,899.19625 9,679.51432 780.31807 9% -3% 18 OUTPATIENT ACCRUED PAYMENTS / OPED \$12,722.04 \$12,381.59 (\$340.45)(\$6,333.39) -5% 19 MEDICARE- NON-GOVERNMENT OP PMT / OPED (\$6,635.13) \$301.75 20 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT (\$59,047,346) (\$61,304,100) (\$2,256,754) 4% NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT) 21 TOTAL ACCRUED CHARGES \$259,219,959 \$276,547,279 \$17,327,320 7% TOTAL ACCRUED PAYMENTS 6% 22 \$161,210,342 \$170.099.126 \$8.888.784 23 TOTAL ALLOWANCES \$98,009,617 \$106,448,153 \$8,438,536 9% 24 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT (\$77,127,162) (\$80,350,009)(\$3,222,846)4% NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA ACCRUED CHARGES ASSOCIATED WITH NGCA 7% \$236.897.234 \$254,229,941 \$17,332,707 25 ACCRUED PAYMENTS ASSOCIATED WITH NGCA \$157,937,775 \$166,056,173 \$8,118,398 5% 26 (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE) 27 TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES \$78,959,459 \$88,173,768 \$9,214,309 12% 28 TOTAL ACTUAL DISCOUNT PERCENTAGE 33.33% 34 68%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS **ACTUAL** ACTUAL **AMOUNT** % LINE DESCRIPTION FY 2015 FY 2016 **DIFFERENCE DIFFERENCE** C. UNINSURED UNINSURED INPATIENT INPATIENT ACCRUED CHARGES \$2,087,344 36% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$364,512 \$554,029 \$189,517 52% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 17.46% 19.49% 2.03% 12% 4 DISCHARGES 26% 89 112 14% CASE MIX INDEX (CMI) 1.08550 1.24070 0.15520 5 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 96.60950 138.95840 42.34890 44% INPATIENT ACCRUED PAYMENT / CMAD 6% \$3,773.05 \$3,987.01 \$213.97 8 NON-GOVERNMENT - UNINSURED IP PMT / CMAD \$8,537.20 \$8,353.05 (\$184.15) -2% MEDICARE - UNINSURED IP PMT / CMAD \$3,899.85 \$3,676.01 (\$223.84)-6% 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$510,812 \$134,050 36% \$376,762 PATIENT DAYS 15% 11 459 528 69 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$794.14 \$1,049.30 \$255.15 32% 12 13 AVERAGE LENGTH OF STAY 4.7 (0.4)-9% UNINSURED OUTPATIENT \$1,638,955 18% OUTPATIENT ACCRUED CHARGES (OP CHGS) \$8.869.175 \$10.508.130 14 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$1,431,552 \$1,453,376 \$21,824 2% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES -14% 16.14% 13.83% -2.31% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 424.90% 369.62% -55.28% -13% 378.16315 413.97890 35.81576 9% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 19 OUTPATIENT ACCRUED PAYMENTS / OPED -7% \$3,785.54 \$3.510.75 (\$274.79)20 NON-GOVERNMENT - UNINSURED OP PMT / OPED \$8,870.84 -1% \$8.936.50 (\$65.66) 10% 21 MEDICARE - UNINSURED OP PMT / OPED \$2,301.37 \$2,537.46 \$236.09 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$870,294 \$1,050,454 \$180,161 21% UNINSURED TOTALS (INPATIENT AND OUTPATIENT) 22% 23 TOTAL ACCRUED CHARGES \$10,956,519 \$13,351,054 \$2,394,535 24 TOTAL ACCRUED PAYMENTS \$1,796,064 \$2,007,405 \$211,341 12% 25 TOTAL ALLOWANCES \$9,160,455 \$11,343,649 \$2,183,194 24% 26 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT \$1,247,056 \$1,561,266 \$314.211 25%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS ACTUAL ACTUAL **AMOUNT** % LINE DESCRIPTION FY 2015 FY 2016 **DIFFERENCE DIFFERENCE** D. STATE OF CONNECTICUT MEDICAID MEDICAID INPATIENT INPATIENT ACCRUED CHARGES \$44,691,115 \$47,665,462 \$2,974,347 7% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$13,444,325 \$13,845,930 \$401,605 3% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 30.08% 29.05% -1.03% -3% 4 DISCHARGES 2% 2.528 2.568 40 5 CASE MIX INDEX (CMI) 1.06610 0.01130 1% 1.07740 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 2,695.10080 2,766.76320 71.66240 3% INPATIENT ACCRUED PAYMENT / CMAD 0% 7 \$4,988.43 \$5,004.38 \$15.95 8 NON-GOVERNMENT - MEDICAID IP PMT / CMAD \$7,321.81 \$7,335.69 \$13.87 0% 9 MEDICARE - MEDICAID IP PMT / CMAD \$2,684.46 \$2,658.64 (\$25.82) -1% 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$7,234,888 \$7,355,830 \$120,942 2% 11 PATIENT DAYS 9% 9.794 10.694 900 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$1,372.71 \$1,294.74 (\$77.97)-6% 12 13 AVERAGE LENGTH OF STAY 7% MEDICAID OUTPATIENT 9% 14 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$113.692.625 \$123.803.313 \$10.110.688 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$19,412,267 \$23,912,127 \$4,499,860 23% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 13% 17.07% 19.31% 2.24% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 254.40% 259.73% 5.34% 2% 6.669.96384 4% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 6,431.14310 238.82073 19 OUTPATIENT ACCRUED PAYMENTS / OPED 19% \$3,018.48 \$3,585,05 \$566.57 20 NON-GOVERNMENT - MEDICAID OP PMT / OPED \$8,796.55 (\$907.02) -9% \$9.703.57 -20% 21 MEDICARE - MEDICAID OP PMT / OPED \$3,068.43 \$2,463.16 (\$605.27)22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$19,733,533 \$16,429,199 (\$3,304,334)-17% MEDICAID TOTALS (INPATIENT + OUTPATIENT) 23 TOTAL ACCRUED CHARGES \$158,383,740 \$171,468,775 \$13,085,035 8% 24 TOTAL ACCRUED PAYMENTS \$32,856,592 \$37,758,057 \$4,901,465 15% 25 TOTAL ALLOWANCES \$125,527,148 \$133,710,718 \$8,183,570 7% 26 TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT \$26.968.421 \$23,785,029 (\$3,183,392) -12%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS ACTUAL ACTUAL **AMOUNT** % LINE DESCRIPTION FY 2015 FY 2016 **DIFFERENCE DIFFERENCE** E. OTHER MEDICAL ASSISTANCE (O.M.A.) OTHER MEDICAL ASSISTANCE INPATIENT INPATIENT ACCRUED CHARGES (\$949.379)-41% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$564,828 \$448,891 (\$115,937)-21% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 24.53% 33.17% 8 64% 35% 4 DISCHARGES -39% 98 60 (38)5 CASE MIX INDEX (CMI) 1.34780 1.42490 0.07710 6% 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 132.08440 85.49400 (46.59040) -35% INPATIENT ACCRUED PAYMENT / CMAD 7 \$4,276.27 \$5,250.56 \$974.29 23% 8 NON-GOVERNMENT - O.M.A IP PMT / CMAD \$8,033.98 \$7,089.51 (\$944.47)-12% 9 MEDICARE - O.M.A. IP PMT / CMAD \$3,396.62 \$2,412.46 (\$984.16) -29% 10 INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$448,641 \$206.251 (\$242,390) -54% 11 PATIENT DAYS (335)-54% 625 290 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$1,547.90 \$644.18 71% 12 \$903.72 13 AVERAGE LENGTH OF STAY -24% (1.5)OTHER MEDICAL ASSISTANCE OUTPATIENT \$668,869 23% 14 OUTPATIENT ACCRUED CHARGES (OP CHGS) \$2,956,245 \$3,625,114 15 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$735,727 \$848,955 \$113,228 15% 16 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 24.89% 23.42% -1.47% -6% 17 OUTPATIENT CHARGES / INPATIENT CHARGES 128.38% 267.85% 139.47% 109% 125.80848 160.70869 28% 18 OUTPATIENT EQUIVALENT DISCHARGES (OPED) 34.90022 19 OUTPATIENT ACCRUED PAYMENTS / OPED (\$565.42) -10% \$5.847.99 \$5,282,57 20 NON-GOVERNMENT - O.M.A OP PMT / CMAD 3% \$6.874.05 \$7.099.02 \$224.97 220% 21 MEDICARE - O.M.A. OP PMT / CMAD \$238.92 \$765.64 \$526.72 22 OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT \$30,058 \$123,045 \$92,986 309% OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT) -5% 23 TOTAL ACCRUED CHARGES \$5,259,047 \$4,978,537 (\$280.510)24 TOTAL ACCRUED PAYMENTS \$1,300,555 \$1,297,846 (\$2,709)0% 25 TOTAL ALLOWANCES \$3,958,492 \$3,680,691 (\$277,801) -7% 26 TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT \$478.699 \$329,296 -31% (\$149,403)

	WILLIAM W. BACKU	IS HOSPITAL			
	TWELVE MONTHS AC				
	FISCAL YEAR				
	REPORT FORM 500 - CALCULATION C		PAYMENT LIM	IT	
	AND BASELINE UNDERPAYMENT DA				
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
F.	TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICA	AL ASSISTANCE)		
	TOTAL MEDICAL ASSISTANCE INPATIENT				
1	INPATIENT ACCRUED CHARGES	\$46,993,917	\$49,018,885	\$2,024,968	4%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$14,009,153	\$14,294,821	\$285,668	2%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	29.81%	29.16%	-0.65%	-2%
4	DISCHARGES	2,626	2,628	2	0%
5	CASE MIX INDEX (CMI)	1.07661	1.08533	0.00872	1%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	2,827.18520	2,852.25720	25.07200	1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$4,955.16	\$5,011.76	\$56.60	1%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$7,355.09	\$7,328.31	(\$26.78)	0%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,717.73	\$2,651.26	(\$66.47)	-2%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$7,683,529	\$7,562,081	(\$121,448)	-2%
11	PATIENT DAYS	10,419	10,984	565	5%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,344.58	\$1,301.42	(\$43.16)	-3%
13	AVERAGE LENGTH OF STAY	4.0	4.2	0.2	5%
	TOTAL MEDICAL ASSISTANCE OUTPATIENT				
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$116,648,870	\$127,428,427	\$10,779,557	9%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$20,147,994	\$24,761,082	\$4,613,088	23%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	17.27%	19.43%	2.16%	12%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	248.22%	259.96%	11.74%	5%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,556.95158	6,830.67253	273.72095	4%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,072.77	\$3,624.98	\$552.22	18%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$9,649.28	\$8,756.61	(\$892.67)	-9%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$3,014.14	\$2,423.22	(\$590.92)	-20%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$19,763,591	\$16,552,244	(\$3,211,347)	-16%
				, , , , , ,	
	TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIEN	NT)			
23	TOTAL ACCRUED CHARGES	\$163,642,787	\$176,447,312	\$12,804,525	8%
24	TOTAL ACCRUED PAYMENTS	\$34,157,147	\$39,055,903	\$4,898,756	14%
25	TOTAL ALLOWANCES	\$129,485,640	\$137,391,409	\$7,905,769	6%

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS ACTUAL ACTUAL **AMOUNT** % LINE DESCRIPTION FY 2015 FY 2016 **DIFFERENCE DIFFERENCE** G. CHAMPUS / TRICARE **CHAMPUS / TRICARE INPATIENT** INPATIENT ACCRUED CHARGES \$2,468,203 \$2,997,430 \$529,227 21% 2 INPATIENT ACCRUED PAYMENTS (IP PMT) \$946.468 \$1,202,114 \$255,646 27% 3 INPATIENT PAYMENTS / INPATIENT CHARGES 38.35% 40.10% 1.76% 5% 4 DISCHARGES 13% 212 239 27 0.03400 5% 5 CASE MIX INDEX (CMI) 0.63120 0.66520 6 CASE MIX ADJUSTED DISCHARGES (CMAD) 133.81440 158.98280 25.16840 19% INPATIENT ACCRUED PAYMENT / CMAD \$7,072.99 \$488.29 7% 7 \$7,561.28 8 PATIENT DAYS 539 610 71 13% 9 INPATIENT ACCRUED PAYMENT / PATIENT DAY \$1,755.97 \$1,970.68 \$214.71 12% 10 AVERAGE LENGTH OF STAY 0.0 0% 2.5 2.6 CHAMPUS / TRICARE OUTPATIENT 11 OUTPATIENT ACCRUED CHARGES (OP CHGS \$8,574,168 \$9,186,160 \$611,992 7% 12 OUTPATIENT ACCRUED PAYMENTS (OP PMT) \$2,307,600 \$2,219,792 (\$87,808)-4% CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT) 13 TOTAL ACCRUED CHARGES \$11,042,371 \$12,183,590 \$1,141,219 10% 14 TOTAL ACCRUED PAYMENTS 5% \$3,254,068 \$3,421,906 \$167,838 15 TOTAL ALLOWANCES \$7,788,303 \$8,761,684 \$973,381 12% Н. OTHER DATA OTHER OPERATING REVENUE \$6,576,794 \$5,244,953 (\$1,331,841) -20% \$251,154,393 \$17,703,002 \$268,857,395 7% UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment) \$0 \$0 0% 3 COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY) 4 CHARITY CARE (CHARGES) \$4,292,994 \$259.376 6% \$4.033.618 5 BAD DEBTS (CHARGES) \$8,681,323 \$8,369,786 (\$311,537) -4% UNCOMPENSATED CARE (CHARGES) 0% 6 \$12,714,941 \$12,662,780 (\$52,161)7 COST OF UNCOMPENSATED CARE \$5,106,450 \$5,115,590 \$9,141 0% TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY) TOTAL ACCRUED CHARGES \$176,447,312 \$12,804,525 8% 8 \$163.642.787 14% 9 TOTAL ACCRUED PAYMENTS \$34,157,147 \$39,055,903 \$4,898,756 10 COST OF TOTAL MEDICAL ASSISTANCE \$65,720,608 \$71,282,306 \$5,561,699 8% MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT \$31,563,461 \$32,226,403 \$662,943 20

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS ACTUAL ACTUAL **AMOUNT** % LINE DESCRIPTION FY 2015 FY 2016 **DIFFERENCE DIFFERENCE** AGGREGATE DATA **TOTALS - ALL PAYERS** TOTAL INPATIENT CHARGES \$248.714.955 \$246,875,303 (\$1.839.652) -1% 2 TOTAL INPATIENT PAYMENTS \$122,450,038 \$123,157,297 \$707,259 1% TOTAL INPATIENT PAYMENTS / CHARGES 3 49.23% 49.89% 0.65% 1% 4 TOTAL DISCHARGES -2% 10,803 10.607 (196)2% 5 TOTAL CASE MIX INDEX 1.37411 0.02131 1.35280 6 TOTAL CASE MIX ADJUSTED DISCHARGES 14,614.31360 14,575.14830 (39.16530) 0% 7 TOTAL OUTPATIENT CHARGES 11% \$489,888,191 \$541,601,986 \$51,713,795 8 OUTPATIENT CHARGES / INPATIENT CHARGES 196.97% 219.38% 22.42% 11% 9 TOTAL OUTPATIENT PAYMENTS \$174,180,497 \$189,765,164 \$15,584,667 9% 10 OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 35.04% -1% 35.56% -0.52% 11 TOTAL CHARGES \$738,603,146 \$788,477,289 \$49,874,143 7% 5% 12 TOTAL PAYMENTS \$296,630,535 \$312,922,461 \$16,291,926 13 TOTAL PAYMENTS / TOTAL CHARGES 40.16% 39.69% -0.47% -1% 14 PATIENT DAYS 47,919 46,555 (1,364)-3% В. **TOTALS - ALL GOVERNMENT PAYERS** INPATIENT CHARGES \$184,343,467 \$181,994,518 (\$2,348,949) -1% 2 INPATIENT PAYMENTS \$74,455,663 \$72,905,983 (\$1,549,680) -2% GOVT. INPATIENT PAYMENTS / CHARGES 40.39% 40.06% -0.33% -1% -3% 4 DISCHARGES 7,863 7,640 (223) 5 1.37473 0.01195 1% CASE MIX INDEX 1.36279 6 CASE MIX ADJUSTED DISCHARGES 10,715.57960 10,502.94080 (212.63880) -2% 12% 7 **OUTPATIENT CHARGES** \$295,039,720 \$329,935,492 \$34,895,772 8 OUTPATIENT CHARGES / INPATIENT CHARGES 160.05% 181.29% 21.24% 13% 9 OUTPATIENT PAYMENTS \$60,964,530 \$69,917,352 \$8,952,822 15% OUTPATIENT PAYMENTS / OUTPATIENT CHARGES 3% 10 20.66% 21.19% 0.53% 11 TOTAL CHARGES \$479,383,187 \$511,930,010 \$32.546.823 7% 12 TOTAL PAYMENTS \$135,420,193 \$142,823,335 \$7,403,142 5% 13 TOTAL PAYMENTS / CHARGES 28.25% 27.90% -0.35% -1% 14 PATIENT DAYS 37,026 35,984 (1,042)-3% TOTAL GOVERNMENT DEDUCTIONS 7% 15 \$343,962,994 \$369,106,675 \$25,143,681 C. **AVERAGE LENGTH OF STAY** MEDICARE (0.1)-1% (0.1)2 NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 3.7 3.6 -4% 3 UNINSURED 5.2 4.7 (0.4)-9% 4 MEDICAID 3.9 42 0.3 7% 5 OTHER MEDICAL ASSISTANCE (1.5)-24% 6.4 4.8 6 CHAMPUS / TRICARE 2.5 2.6 0.0 0% 7 TOTAL AVERAGE LENGTH OF STAY 4.4 4.4 (0.0)-1%

	WILLIAM W. BACKU	SHOSPITAL			
	TWELVE MONTHS AC				
	FISCAL YEAR				
	REPORT FORM 500 - CALCULATION O		PAYMENTIIM	IIT	
	AND BASELINE UNDERPAYMENT DAT				
	AND DAGLENE ONDER ATMENT DA	IA. COMI AIXA	IIVE AIVAETOI	Ĭ	
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE	DIFFERENCE
		1.20.0	<u> </u>		
III.	DATA USED IN BASELINE UNDERPAYMENT CALCULATION				
1	TOTAL CHARGES	\$738,603,146	\$788,477,289	\$49,874,143	7%
2	TOTAL GOVERNMENT DEDUCTIONS	\$343,962,994	\$369,106,675	\$25,143,681	7%
3	UNCOMPENSATED CARE	\$12,714,941	\$12,662,780	(\$52,161)	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$78,959,459	\$88,173,768	\$9,214,309	12%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,335,217	\$0	(\$6,335,217)	-100%
6	TOTAL ADJUSTMENTS	\$441,972,611	\$469,943,223	\$27,970,612	6%
7	TOTAL ACCRUED PAYMENTS	\$296,630,535	\$318,534,066	\$21,903,531	7%
8	UCP DSH PAYMENTS. (Gross DSH+Upper Limit Adj OHCA Input)	\$0	\$0	\$0	0%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$296,630,535	\$318,534,066	\$21,903,531	7%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4016101700	0.4039863550	0.0023761851	1%
11	COST OF UNCOMPENSATED CARE	\$5,106,450	\$5,115,590	\$9,141	0%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$31,563,461	\$32,226,403	\$662,943	2%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND				
	MEDICAL ASSISTANCE UNDERPAYMENT	\$36,669,910	\$37,341,994	\$672,084	2%
IV.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLO	<u>GY)</u>			
1	MEDICAID	\$19,733,533	\$16,429,199	(\$3,304,334)	-17%
2	OTHER MEDICAL ASSISTANCE	\$478,699	\$329,296	(\$149,403)	-31%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,247,056	\$1,561,266	\$314,211	25%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$21,459,288	\$18,319,761	(\$3,139,527)	-15%
٧.	DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600)			
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$9,607,784	\$0	(\$9,607,784)	-100.00%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	(\$11,102,535)	(\$12,778,461)	(\$1,675,926)	15.09%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$285,528,000	\$300,144,000	\$14,616,000	5.12%
_	DI LICAMANICO OTLICO AD ILIOT. TO CUICA DECIVICO COCCO DELICIVIS		*	*	0.000/
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP AUDIT. FINANCIAL STATEMENTS	\$738,603,146	\$788,477,289	\$49,874,143	6.75%
	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$81,470	\$255,977	\$174,507	214.20%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$12,796,411	\$12,918,757	\$122,346	0.96%

	WILLIAM W. BACKUS HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2016			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2015	<u>FY 2016</u>	DIFFERENCE
I.	ACCRUED CHARGES AND PAYMENTS_			
Α.	INPATIENT ACCRUED CHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$64,371,488	\$64,880,785	\$509,297
	MEDICARE	\$134,881,347	129,978,203	(\$4,903,144
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$46,993,917	49,018,885	\$2,024,968
	MEDICAID OTHER MEDICAL ASSISTANCE	\$44,691,115 \$2,302,802	47,665,462 1,353,423	\$2,974,347 (\$949,379
	CHAMPUS / TRICARE	\$2,468,203	2,997,430	\$529,227
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,087,344	2,842,924	\$755,580
<u> </u>	TOTAL INPATIENT GOVERNMENT CHARGES	\$184,343,467	\$181,994,518	(\$2,348,949
\vdash	TOTAL INPATIENT CHARGES	\$248,714,955	\$246,875,303	(\$1,839,652
В.	OUTPATIENT ACCRUED CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$194,848,471	\$211,666,494	\$16,818,023
	MEDICARE	\$169,816,682	193,320,905	\$23,504,223
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	\$116,648,870 \$113,692,625	127,428,427 123,803,313	\$10,779,557 \$10,110,688
	OTHER MEDICAL ASSISTANCE	\$2,956,245	3,625,114	\$668,869
	CHAMPUS / TRICARE	\$8,574,168	9,186,160	\$611,992
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$8,869,175	10,508,130	\$1,638,955
	TOTAL OUTPATIENT GOVERNMENT CHARGES TOTAL OUTPATIENT CHARGES	\$295,039,720 \$489,888,191	\$329,935,492 \$541,601,986	\$34,895,772 \$51,713,795
	TOTAL GOTFATIENT CHARGES	\$409,000,131	\$341,001,900	\$51,713,795
	TOTAL ACCRUED CHARGES			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$259,219,959	\$276,547,279	\$17,327,320
3	TOTAL MEDICARE TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$304,698,029 \$163,642,787	\$323,299,108 \$176,447,312	\$18,601,079 \$12,804,525
	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$158,383,740	\$171,468,775	\$13,085,035
	TOTAL OTHER MEDICAL ASSISTANCE	\$5,259,047	\$4,978,537	(\$280,510
6	TOTAL CHAMPUS / TRICARE	\$11,042,371	\$12,183,590	\$1,141,219
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CHARGES	\$10,956,519	\$13,351,054	\$2,394,535
	TOTAL GOVERNMENT CHARGES TOTAL CHARGES	\$479,383,187 \$738,603,146	\$511,930,010 \$788,477,289	\$32,546,823 \$49,874,143
		V ,	4.44,,=	¥ 10,01 1,1 10
	INPATIENT ACCRUED PAYMENTS	A		
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	\$47.994.375 \$59,500,042	\$50.251.314 57,409,048	\$2,256,939 (\$2,090,994
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$14,009,153	14,294,821	\$285,668
4	MEDICAID	\$13,444,325	13,845,930	\$401,605
	OTHER MEDICAL ASSISTANCE	\$564,828	448,891	(\$115,937
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$946,468 \$364,512	1,202,114 554,029	\$255,646 \$189,517
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$74,455,663	\$72,905,983	(\$1.549.680
	TOTAL INPATIENT PAYMENTS	\$122,450,038	\$123,157,297	\$707,259
	OUTPATIENT ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$113,215,967	\$119,847,812	\$6,631,845
	MEDICARE	\$38,508,936	42,936,478	\$4,427,542
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$20,147,994	24,761,082	\$4,613,088
	MEDICAID OTHER MEDICAL ASSISTANCE	\$19,412,267	23,912,127	\$4,499,860
5 6	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	\$735,727 \$2,307,600	848,955 2,219,792	\$113,228 (\$87,808
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,307,600 \$1,431,552	1,453,376	\$21,824
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$60,964,530	\$69,917,352	\$8,952,822
\vdash	TOTAL OUTPATIENT PAYMENTS	\$174,180,497	\$189,765,164	\$15,584,667
F.	TOTAL ACCRUED PAYMENTS			
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$161,210,342	\$170,099,126	\$8,888,784
2	TOTAL MEDICARE	\$98,008,978	\$100,345,526	\$2,336,548
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$34,157,147	\$39,055,903	\$4,898,756
4	TOTAL MEDICAID TOTAL OTHER MEDICAL ASSISTANCE	\$32,856,592	\$37,758,057	\$4,901,465
5 6	TOTAL OTHER MEDICAL ASSISTANCE TOTAL CHAMPUS / TRICARE	\$1,300,555 \$3,254,068	\$1,297,846 \$3,421,906	(\$2,709 \$167,838
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$1,796,064	\$2,007,405	\$211,341
	TOTAL GOVERNMENT PAYMENTS	\$135,420,193	\$142,823,335	\$7,403,142
	TOTAL PAYMENTS	\$296,630,535	\$312,922,461	\$16,291,926

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND **BASELINE UNDERPAYMENT DATA** (1) (2) (3) (4) (5) ACTUAL ACTUAL **AMOUNT DIFFERENCE** FY 2015 FY 2016 LINE DESCRIPTION II. PAYER MIX INPATIENT PAYER MIX BASED ON ACCRUED CHARGES A. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 8.72% -0.49% 2 MEDICARE 18.26% 16.48% -1.78% MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 3 6.36% 6.22% -0.15% MEDICAID OTHER MEDICAL ASSISTANCE 4 6.05% 6.05% -0 01% 5 0.17% -0.14% 0.31% CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) 6 0.33% 0.38% 0.05% 7 0.28% 0.36% 0.08% TOTAL INPATIENT GOVERNMENT PAYER MIX TOTAL INPATIENT PAYER MIX 33.67% 31.31% -2.36% OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES В NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 26.38% 26.84% 0.46% 2 1.53% MEDICARE 22.99% 24.52% MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 15.79% 16.16% 0.37% 4 15.70% MEDICAID 15.39% 0.31% OTHER MEDICAL ASSISTANCE 0.40% 0.46% 0.06% 6 CHAMPUS / TRICARE 1.16% 1.17% 0.00% UNINSURED (INCLUDED IN NON-GOVERNMENT) 0.13% TOTAL OUTPATIENT GOVERNMENT PAYER MIX 39.95% 41.84% 1.90% TOTAL OUTPATIENT PAYER MIX 68.69% 66.33% 2.36% TOTAL PAYER MIX BASED ON ACCRUED CHARGES 100.00% 100.00% 0.00% INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 16.18% 16.06% -0.12% 3 MEDICARE 20.06% 18.35% -1.71% -0.15% MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 4.72% 4.57% -0.119 OTHER MEDICAL ASSISTANCE 5 0.19% 0.14% -0.05% CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT) 0.32% 0.38% 0.07% 0.12% 0.18% 0.05% TOTAL INPATIENT GOVERNMENT PAYER MIX 25.10% 23.30% -1.80% TOTAL INPATIENT PAYER MIX 41.28% 39.36% -1.92% OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) 38.17% 38.30% 0.13% 2 MEDICARE 12.98% 13.72% 0.74% MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) 6.79% 7.91% 1.129 MEDICAID 6.54% 7.64% 1.10% OTHER MEDICAL ASSISTANCE 0.27% 0.02% 6 CHAMPUS / TRICARE 0.78% 0.71% -0.07% JNINSURED (INCLUDED IN NON-GOVERNMENT) 0.48% 0.46% -0.02% TOTAL OUTPATIENT GOVERNMENT PAYER MIX 20.55% 22.34% 1.79% TOTAL OUTPATIENT PAYER MIX 58.72% 60.64% 1.92%

TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS

100.00%

100.00%

0.00%

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	WILLIAM W. BACKUS HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2016			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	40	(2)	(1)	(=)
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
III.	DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED	DATA		
Α.	DISCHARGES			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,940	2,967	27
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,025 2,626	4,773 2,628	(252)
4	MEDICAID	2,528	2,568	40
	OTHER MEDICAL ASSISTANCE CHAMPUS / TRICARE	98 212	60 239	(38)
	UNINSURED (INCLUDED IN NON-GOVERNMENT)	89	112	23
	TOTAL GOVERNMENT DISCHARGES	7,863	7,640	(223)
	TOTAL DISCHARGES	10,803	10,607	(196)
В.	PATIENT DAYS			
	NONLOGOVERNIMENT (NOCLURING CELERALY LINES CORRES)	10.000	10.5=:	(0.55)
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	10,893 26,068	10,571 24,390	(322) (1,678)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	10,419	10,984	565
	MEDICAID	9,794	10,694	900
	OTHER MEDICAL ASSISTANCE	625 539	290	(335)
	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	459	610 528	71 69
	TOTAL GOVERNMENT PATIENT DAYS	37,026	35,984	(1,042)
	TOTAL PATIENT DAYS	47,919	46,555	(1,364)
C.	AVERAGE LENGTH OF STAY (ALOS)			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	3.7	3.6	(0.1)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5.2 4.0	5.1 4.2	(0.1)
4	MEDICAID	3.9	4.2	0.3
	OTHER MEDICAL ASSISTANCE	6.4	4.8	(1.5)
6	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.5 5.2	2.6 4.7	0.0 (0.4)
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	4.7	4.7	0.0
	TOTAL AVERAGE LENGTH OF STAY	4.4	4.4	(0.0)
D.	CASE MIX INDEX			
	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.32610	1.37250	0.04640
	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.54320 1.07661	1.56960 1.08533	0.02640 0.00872
	MEDICAID	1.06610	1.07740	0.01130
	OTHER MEDICAL ASSISTANCE	1.34780	1.42490	0.07710
	CHAMPUS / TRICARE	0.63120	0.66520	0.03400
	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT CASE MIX INDEX	1.08550 1.36279	1.24070 1.37473	0.15520 0.01195
	TOTAL CASE MIX INDEX	1.35280	1.37411	0.02131
E.	OTHER REQUIRED DATA			
	TOTAL CHARGES ASSOCIATED WITH NON-COVERNMENT CONTRACTUAL ALL CHARGES	#000 007 05 i	COE 4 200 0 : :	£47.000.755
	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$236,897,234 \$157,937,775	\$254,229,941 \$166,056,173	\$17,332,707 \$8,118,398
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$78,959,459	\$88,173,768	\$9,214,309
	TOTAL ACTUAL DISCOUNT PERCENTAGE EMPLOYEE SELF INSURANCE GROSS REVENUE	33.33% \$9,607,784	34.68% \$0	1.35% (\$9.607.784)
6	EMPLOYEE SELF INSURANCE GROSS REVENUE EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,335,217	\$0 \$0	(\$6,335,217)
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT- OHCA	\$0	\$0	
	INPUT)			\$0
	CHARITY CARE BAD DEBTS	\$4,033,618	\$4,292,994	\$259,376 (\$311,537)
	TOTAL UNCOMPENSATED CARE	\$8,681,323 \$12,714,941	\$8,369,786 \$12,662,780	(\$311,537) (\$52,161)
11	TOTAL OTHER OPERATING REVENUE	\$6,576,794	\$5,244,953	(\$1,331,841)
12	TOTAL OPERATING EXPENSES	\$251,154,393	\$268,857,395	\$17,703,002

	WILLIAM W. BACKUS HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2016			
	REPORT 550 - CALCULATION OF DSH UPPER PAYN	IENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
	DESCRIPTION	ACTUAL FY 2015	ACTUAL FY 2016	AMOUNT DIFFERENCE
IV.	DSH UPPER PAYMENT LIMIT CALCULATIONS			
A.	CASE MIX ADJUSTED DISCHARGES			
1	NON COVEDNMENT (INCLUDING SELE DAY (TIMINGUEDED)	3,898.73400	4.072.20750	173.47350
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED) MEDICARE	3,898.73400 7,754.58000	7.491.70080	(262.87920)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,827.18520	2,852.25720	25.07200
	MEDICAID	2,695.10080	2,766.76320	71.66240
5	OTHER MEDICAL ASSISTANCE	132.08440	85.49400	(46.59040)
6	CHAMPUS / TRICARE	133.81440	158.98280	25.16840
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	96.60950	138.95840	42.34890
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	10,715.57960 14,614.31360	10,502.94080 14,575.14830	(212.63880) (39.16530)
	TOTAL CASE MIX ADJUSTED DISCHARGES	14,014.31300	14,575.14630	(39.16530)
В.	OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	8,899.19625	9,679.51432	780.31807
2	MEDICARE	6,326.51472	7,099.04167	772.52695
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,556.95158	6,830.67253	273.72095
4	MEDICAID	6,431.14310	6,669.96384	238.82073
	OTHER MEDICAL ASSISTANCE	125.80848	160.70869	34.90022
	CHAMPUS / TRICARE	736.45629	732.45822	-3.99807
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	378.16315 13,619.92258	413.97890 14,662.17242	35.81576 1,042.24984
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES TOTAL OUTPATIENT EQUIVALENT DISCHARGES	22,519.11884	24,341.68674	1,822.56791
		22,519.11004	24,341.00074	1,022.30791
C.	INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,310.25	\$12,340.07	\$29.82
2	MEDICARE	\$7,672.89	\$7,663.02	(\$9.87)
	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,955.16 \$4,988.43	\$5,011.76 \$5,004.38	\$56.60 \$15.95
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	\$4,988.43 \$4,276.27	\$5,004.38 \$5,250.56	\$974.29
	CHAMPUS / TRICARE	\$7,072.99	\$7,561.28	\$488.29
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,773.05	\$3,987.01	\$213.97
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$6,948.36	\$6,941.48	(\$6.87)
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,378.77	\$8,449.81	\$71.04
D.	OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$12,722.04	\$12,381.59	(\$340.45)
	MEDICARE	\$6,086.91	\$6,048.21	(\$38.70)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$3,072.77	\$3,624.98	\$552.22
	MEDICAID	\$3,018.48	\$3,585.05	\$566.57
	OTHER MEDICAL ASSISTANCE	\$5,847.99 \$3,133,38	\$5,282.57	(\$565.42) (\$102.78)
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,133.38 \$3,785.54	\$3,030.61 \$3,510.75	(\$102.78)
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	ψυ, 100.04	ψυ,υ ι υ. / υ	(ψ214.19)
	The state of the s	\$4,476.13	\$4,768.55	\$292.42
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,734.78	\$7,795.89	\$61.11
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	WILLIAM W. BACKUS HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2016	ACNIT I INNIT AND		
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	MENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
. ,				
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	FY 2015	FY 2016	DIFFERENCE
V.	CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)			
٠.	CALCOLATED UNDERTAINENT (OF FER EINIT METHODOLOGY)			
1	MEDICAID	\$19,733,533	\$16,429,199	(\$3,304,334
2	OTHER MEDICAL ASSISTANCE	\$478,699	\$329,296	(\$149,403
3	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$1,247,056	\$1,561,266	\$314,211
	TOTAL CALCOLATED UNDERPATMENT (UPPER LIMIT METHODOLOGY)	\$21,459,288	\$18,319,761	(\$3,139,527
VI.	CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOL	OGY)		
,				
1	TOTAL CHARGES	\$738,603,146	\$788,477,289	\$49,874,143
2	TOTAL GOVERNMENT DEDUCTIONS	\$343,962,994	\$369,106,675	\$25,143,681
<u>3</u>	UNCOMPENSATED CARE TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$12,714,941 \$78,959,459	\$12,662,780 \$88,173,768	(\$52,161) \$9,214,309
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$6,335,217	\$0	(\$6,335,217
6	TOTAL ADJUSTMENTS	\$441,972,611	\$469,943,223	\$27,970,612
7	TOTAL ACCRUED PAYMENTS	\$296,630,535	\$318,534,066	\$21,903,531
8	UCP DSH PAYMENTS (OHCA INPUT) NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$0 \$296,630,535	\$0 \$318,534,066	\$0 \$21,903,531
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.4016101700	0.4039863550	0.0023761851
11	COST OF UNCOMPENSATED CARE	\$5,106,450	\$5,115,590	\$9,141
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$31,563,461	\$32,226,403	\$662,943
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$36,669,910	\$37,341,994	\$672,084
VII.	RATIOS			
A.	RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	74.56%	77.45%	2.89%
2	MEDICARE	44.11%	44.17%	0.06%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	29.81% 30.08%	29.16% 29.05%	-0.65% -1.03%
5	OTHER MEDICAL ASSISTANCE	24.53%	33.17%	8.64%
6	CHAMPUS / TRICARE	38.35%	40.10%	1.76%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	17.46%	19.49%	2.03%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES			
	TOTAL DATIO OF INDITIENT DAVISTATO TO INDITIENT OLIABORS	40.39%	40.06%	-0.33%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	49.23%	49.89%	0.65%
В.	RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	<u> </u>		_
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	58.10%	56.62%	-1.48%
2	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	22.68% 17.27%	22.21% 19.43%	-0.47% 2.16%
<u>3</u>	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE) MEDICAID	17.27%	19.43% 19.31%	2.16%
5	OTHER MEDICAL ASSISTANCE	24.89%	23.42%	-1.47%
6	CHAMPUS / TRICARE	26.91%	24.16%	-2.75%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	16.14%	13.83%	-2.31%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES			_
	TOTAL DATIO OF OUTDATIENT DAYMENTS TO SUTPATIENT SUAPOSS	20.66% 35.56%	21.19% 35.04%	0.53% -0.52%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	35.56%	35.04%	-0.52%
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	WILLIAM W. BACKUS HOSPITAL			
	TWELVE MONTHS ACTUAL FILING			
	FISCAL YEAR 2016			
	REPORT 550 - CALCULATION OF DSH UPPER PAYM	ENT LIMIT AND		
	BASELINE UNDERPAYMENT DATA			
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	AMOUNT
LINE	DESCRIPTION	<u>FY 2015</u>	<u>FY 2016</u>	DIFFERENCE
3/111	NET REVENUE. GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT	IONE		
V 1111.	NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIAT	IONO		
Α.	RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS			
۸.	REGORDIEM OF CHOOLET INES NET REVENUE TO HOOF THE AGOITES FIRE OF A EMILIARY			
1	TOTAL ACCRUED PAYMENTS	\$296,630,535	\$312,922,461	\$16,291,926
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0	\$0	\$0
	OHCA DEFINED NET REVENUE	\$296,630,535	\$312,922,461	\$16,291,926
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$11.102.535)	(\$12.778.461)	(\$1.675.926)
4	CALCULATED NET REVENUE	\$297,481,890	\$300,144,000	\$2,662,110
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$285,528,000	\$300,144,000	\$14,616,000
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$11,953,890	\$0	(\$11,953,890)
В.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMEN	ITE		
	RECONCILIATION OF ONCA DEFINED GROSS REVENUE TO HOSFITAL AUDITED FIN. STATEMEN	113		
1	OHCA DEFINED GROSS REVENUE	\$738,603,146	\$788,477,289	\$49,874,143
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$738,603,146	\$788,477,289	\$49,874,143
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$738,603,146	\$788,477,289	\$49,874,143
			•	
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	S		
1 2	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS) PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$12,714,941 \$81,470	\$12,662,780 \$255.977	(\$52,161) \$174,507
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$81,470 \$12.796.411	\$255,977 \$12.918.757	\$174,507 \$122.346
		ψ12,730,411	Ψ12,010,701	¥122,540
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$12,796,411	\$12,918,757	\$122,346
_	VARIANCE (MICT DE LECC TUAN OR FOUNT TO \$500)	**	**	**
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

	WILLIAM W. BACKUS HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2016	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
(')	\4)	ACTUAL
LINE	DESCRIPTION	FY 2016
I.	ACCRUED CHARGES AND PAYMENTS	
Α.	INPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$64,880,785
3	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	129,978,203 49,018,885
4	MEDICALD	47,665,462
5	OTHER MEDICAL ASSISTANCE	1,353,423
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,997,430 2.842.924
,	TOTAL INPATIENT GOVERNMENT CHARGES	\$181,994,518
	TOTAL INPATIENT CHARGES	\$246,875,303
В.	OUTPATIENT ACCRUED CHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$211,666,494
3	MEDICARE MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	193,320,905 127,428,427
	MEDICAID	123,803,313
5	OTHER MEDICAL ASSISTANCE	3,625,114
<u>6</u> 7	CHAMPUS / TRICARE UNINSURED (INCLUDED IN NON-GOVERNMENT)	9,186,160 10,508,130
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$329,935,492
	TOTAL OUTPATIENT CHARGES	\$541,601,986
C.	TOTAL ACCRUED CHARGES	
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$276,547,279
2	TOTAL GOVERNMENT ACCRUED CHARGES TOTAL ACCRUED CHARGES	511,930,010 \$788,477,289
		¥100,111,200
D.	INON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$50,251,314
2	MEDICARE	57,409,048
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14,294,821
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	13,845,930 448.891
6	CHAMPUS / TRICARE	1,202,114
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL INPATIENT GOVERNMENT PAYMENTS	554,029
	TOTAL INPATIENT PAYMENTS TOTAL INPATIENT PAYMENTS	\$72,905,983 \$123,157,297
_		
	OUTPATIENT ACCRUED PAYMENTS NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$119,847,812
2	MEDICARE	42,936,478
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	24,761,082
<u>4</u> 5	MEDICAID OTHER MEDICAL ASSISTANCE	23,912,127 848,955
6	CHAMPUS / TRICARE	2,219,792
7	UNINSURED (INCLUDED IN NON-GOVERNMENT) TOTAL OUTPATIENT COVERNMENT PAYMENTS	1,453,376
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS TOTAL OUTPATIENT PAYMENTS	\$69,917,352 \$189,765,164
		+ , 3 , -
F.	TOTAL ACCRUED PAYMENTS TOTAL NON COVERNMENT ACCRUED DAYMENTS (INCLUDING CELE DAY (LININGLIDED)	#470.000.400
2	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED) TOTAL GOVERNMENT ACCRUED PAYMENTS	\$170,099,126 142,823,335
	TOTAL ACCRUED PAYMENTS	\$312,922,461

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	WILLIAM W. BACKUS HOSPITAL	
	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2016	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
	BACELINE ONDER! ATMIENT DATA. ACKEED-OF ON TROCEDORES	
		(0)
(1)	(2)	(3)
		ACTUAL
LINE	<u>DESCRIPTION</u>	FY 2016
II.	ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA	
Α.	ACCRUED DISCHARGES	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	2,967
2	MEDICARE	4,773
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	2,628
4	MEDICAID	2,568
5	OTHER MEDICAL ASSISTANCE	60
6	CHAMPUS / TRICARE	239
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	112
	TOTAL DISCHARGES	7,640
	TOTAL DISCHARGES	10,607
В.	CASE MIX INDEX	
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.37250
2	MEDICARE	1.56960
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.08533
4	MEDICAID	1.07740
5	OTHER MEDICAL ASSISTANCE	1.42490
6	CHAMPUS / TRICARE	0.66520
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.24070
	TOTAL GOVERNMENT CASE MIX INDEX	1.37473
	TOTAL CASE MIX INDEX	1.37411
C.	OTHER REQUIRED DATA	
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$254,229,941
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$166,056,173
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	ψ100,000,110
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$88,173,768
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	34.68%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$0
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$0
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$4,292,994
9 10	BAD DEBTS TOTAL UNCOMPENSATED CARE	\$8,369,786 \$12,662,780
10	TOTAL UNCOMPENSATED CARE	\$12,002,780
11	TOTAL OTHER OPERATING REVENUE	\$5,244,953
12	TOTAL OTHER OPERATING REVENUE TOTAL OPERATING EXPENSES	\$5,244,953
- '-	TOTAL OF ENTITIES ENT ENGLO	Ψ200,001,090

	TWELVE MONTHS ACTUAL FILING	
	FISCAL YEAR 2016	
	REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND	
	BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES	
(1)	(2)	(3)
	DESCRIPTION	ACTÚAL <u>FY 2016</u>
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	\$312,922,4
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	
	OHCA DEFINED NET REVENUE	\$312,922,4
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	(\$12,778,4
	CALCULATED NET REVENUE	\$300,144,0
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$300,144,0
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	
B.	RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED GROSS REVENUE	\$788,477,2
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	
	CALCULATED GROSS REVENUE	\$788,477,2
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$788,477,2
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	
C.	RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS	
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$12,662,7
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$255,9 \$12,019.7
	CALCULATED UNCOMPENSATED CARE (CHARTIT CARE AND BAD DEBTS)	\$12,918,7
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$12,918,7
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016

REPORT 650 - HOSPITAL UNCOMPENSATED CARE

(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	FY 2015	FY 2016	DIFFERENCE	<u>DIFFERENCE</u>
Α.	Hospital Charity Care (from HRS Report 500)				
1	Number of Applicants	1,731	1,628	(103)	-6%
2	Number of Approved Applicants	1,575	1,522	(53)	-3%
3	Total Charges (A)	\$4,033,618	\$4,292,994	\$259,376	6%
4	Average Charges	\$2,561	\$2,821	\$260	10%
				(2 2 1 2 2 2 2)	
5	Ratio of Cost to Charges (RCC)	0.355594	0.337039	(0.018555)	-5%
6	Total Cost	\$1,434,330	\$1,446,906	\$12,576	1%
7	Average Cost	\$911	\$951	\$40	4%
8	Charity Care - Inpatient Charges	\$1,132,798	\$1,339,156	\$206,358	18%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	1,619,052	1,159,719	(459,333)	-28%
10	Charity Care - Emergency Department Charges Charity Care - Emergency Department Charges	1,281,768	1,794,119	512,351	40%
11	Total Charges (A)	\$4,033,618	\$4,292,994	\$259,376	6%
- ' '	Total Gladges (A)	Ψ+,033,010	ψτ,232,334	Ψ233,370	070
12	Charity Care - Number of Patient Days	1,713	1,454	(259)	-15%
13	Charity Care - Number of Discharges	352	329	(23)	-7%
14	Charity Care - Number of Outpatient ED Visits	1,642	1,653	11	1%
	Charity Care - Number of Outpatient Visits (Excludes ED				
15	Visits)	4,576	4,698	122	3%
B.	Hospital Bad Debts (from HRS Report 500)				
1	Bad Debts - Inpatient Services	\$1,463,260	\$1,205,360	(\$257,900)	-18%
2	Bad Debts - Impatient Services Bad Debts - Outpatient Services (Excludes ED Bad Debts)	2,622,408	2,831,474	209,066	8%
3	Bad Debts - Gulpatient Gervices (Excludes ED Bad Debts) Bad Debts - Emergency Department	4,595,655	4,332,952	(262,703)	-6%
4	Total Bad Debts (A)	\$8,681,323	\$8,369,786	(\$311,537)	-4%
C.	Hospital Uncompensated Care (from HRS Report 500)				
1	Charity Care (A)	\$4,033,618	\$4,292,994	\$259,376	6%
2	Bad Debts (A)	8,681,323	8,369,786	(311,537)	-4%
3	Total Uncompensated Care (A)	\$12,714,941	\$12,662,780	(\$52,161)	0%
4	Uncompensated Care - Inpatient Services	\$2,596,058	\$2,544,516	(\$51,542)	-2%
	Uncompensated Care - Outpatient Services (Excludes ED	Ψ=,500,000	Ψ=,011,010	(ψο1,ο 12)	270
5	Unc. Care)	4,241,460	3,991,193	(250,267)	-6%
6	Uncompensated Care - Emergency Department	5,877,423	6,127,071	249,648	4%
7	Total Uncompensated Care (A)	\$12,714,941	\$12,662,780	(\$52,161)	0%

		WILLIAM W. BACKUS HO			
		TWELVE MONTHS ACTUA			
		FISCAL YEAR 201	•		
		AL NON-GOVERNMENT GROSS RE		ALLOWANCES,	
		CCRUED PAYMENTS AND DISCOU	UNIPERCENTAGE		
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2015	FY 2016	()	. ,
		ACTUAL TOTAL	ACTUAL TOTAL	AMOUNT	%
LINE	DESCRIPTION	NON-GOVERNMENT	NON-GOVERNMENT	DIFFERENCE	DIFFERENCE
	COMMERCIAL - ALL PAYERS				
1	Total Gross Revenue	\$236,897,234	\$254,229,941	\$17,332,707	7%
2	Total Contractual Allowances	\$78,959,459	\$88,173,768	\$9,214,309	129
	Total Accrued Payments (A)	\$157,937,775	\$166,056,173	\$8,118,398	59
	Total Discount Percentage	33.33%	34.68%	1.35%	40
(A) A	ccrued Payments associated with Non-Gov	vernment Contractual Allowances r	nust exclude any reduction	n for Uncompensated	l Care.

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (3) (4) (5) **ACTUAL ACTUAL ACTUAL** LINE DESCRIPTION FY 2014 FY 2015 FY 2016 **Gross and Net Revenue** Α. 1 Inpatient Gross Revenue \$247,780,251 \$248,714,955 \$246,875,303 \$489,888,191 \$541,601,986 2 Outpatient Gross Revenue \$453,925,211 Total Gross Patient Revenue \$701,705,462 \$738,603,146 \$788,477,289 Net Patient Revenue \$293,617,939 \$285,527,689 \$300,143,644 В. **Total Operating Expenses** 1 **Total Operating Expense** \$252,028,161 \$251,154,393 \$268,857,395 C. **Utilization Statistics** Patient Days 1 48,840 47,919 46,555 10.690 10.803 10.607 2 Discharges 3 Average Length of Stay 4.6 4.4 4.4 138,313 142,304 148,689 Equivalent (Adjusted) Patient Days (EPD) 4 0 Equivalent (Adjusted) Discharges (ED) 30,274 32,081 33,877 D. **Case Mix Statistics** 1.29598 1.35280 1.37411 1 Case Mix Index Case Mix Adjusted Patient Days (CMAPD) 63,296 64,825 63,972 2 14,614 14,575 Case Mix Adjusted Discharges (CMAD) 13,854 3 Case Mix Adjusted Equivalent Patient Days (CMAEPD) 179,251 192,509 204,314 43,400 46,551 Case Mix Adjusted Equivalent Discharges (CMAED) 39,234 5 E. **Gross Revenue Per Statistic** \$16,936 Total Gross Revenue per Patient Day \$14,367 \$15,414 1 2 Total Gross Revenue per Discharge \$65,641 \$68,370 \$74,336 Total Gross Revenue per EPD \$5,073 \$5,190 \$5,303 3 \$23,023 \$23,275 4 Total Gross Revenue per ED \$23,179 Total Gross Revenue per CMAEPD 5 \$3,915 \$3,837 \$3,859 Total Gross Revenue per CMAED \$17,885 \$17,019 \$16,938 6 \$1,748 \$1,660 7 Inpatient Gross Revenue per EPD \$1,791 Inpatient Gross Revenue per ED \$8,185 \$7,753 \$7,287 8

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (4) (5) (3) ACTUAL **ACTUAL** ACTUAL LINE DESCRIPTION FY 2014 FY 2015 FY 2016 Net Revenue Per Statistic F. Net Patient Revenue per Patient Day \$6,012 \$5,959 \$6,447 2 Net Patient Revenue per Discharge \$27,467 \$26,430 \$28,297 Net Patient Revenue per EPD \$2,006 \$2,019 3 \$2,123 Net Patient Revenue per ED \$9,699 \$8,900 \$8,860 4 5 Net Patient Revenue per CMAEPD \$1,638 \$1,483 \$1.469 Net Patient Revenue per CMAED \$7,484 \$6,579 \$6,448 G. Operating Expense Per Statistic 1 Total Operating Expense per Patient Day \$5,160 \$5,241 \$5,775 Total Operating Expense per Discharge \$23,576 \$23,249 \$25,347 2 \$1,765 \$1,808 Total Operating Expense per EPD \$1,822 3 4 Total Operating Expense per ED \$8.325 \$7,829 \$7.936 Total Operating Expense per CMAEPD \$1,406 \$1,305 \$1,316 Total Operating Expense per CMAED \$6,424 \$5,787 \$5,776 6 H. **Nursing Salary and Fringe Benefits Expense** \$39,084,390 \$36,651,849 \$36,817,884 Nursing Salary Expense 1 Nursing Fringe Benefits Expense \$6,103,468 \$7,858,189 2 \$6,219,772 \$42,755,317 Total Nursing Salary and Fringe Benefits Expense \$45,304,162 \$44,676,073 **Physician Salary and Fringe Expense** I. Physician Salary Expense 1 \$13,219,670 \$13,820,490 \$13,424,880 \$2.871.244 Physician Fringe Benefits Expense \$2.522.646 \$2.650.717 2 Total Physician Salary and Fringe Benefits Expense \$15,742,316 \$16,471,207 \$16,296,124 J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense Non-Nursing, Non-Physician Salary Expense \$57,862,829 \$58,034,107 \$57,216,894 2 Non-Nursing, Non-Physician Fringe Benefits Expense \$12,705,071 \$15,015,799 \$19,582,698 \$70,567,900 \$73,049,906 \$76,799,592 Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense K. Total Salary and Fringe Benefits Expense Total Salary Expense \$110,166,889 \$108,506,446 \$107,459,658 1 \$30,312,131 2 Total Fringe Benefits Expense \$21,447,489 \$23,769,984 Total Salary and Fringe Benefits Expense \$131,614,378 \$132,276,430 \$137,771,789

WILLIAM W. BACKUS HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2016 REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE (2) (1) (4) (5) (3) ACTUAL **ACTUAL** ACTUAL LINE DESCRIPTION FY 2014 FY 2015 FY 2016 **Total Full Time Equivalent Employees (FTEs)** L. Total Nursing FTEs 423.1 398.0 390.7 Total Physician FTEs 42.4 44.3 42.6 2 Total Non-Nursing, Non-Physician FTEs 991.5 981.2 973.6 Total Full Time Equivalent Employees (FTEs) 1,457.0 1,423.5 1,406.9 М. Nursing Salaries and Fringe Benefits Expense per FTE 1 Nursing Salary Expense per FTE \$92,376 \$92,090 \$94,236 2 Nursing Fringe Benefits Expense per FTE \$14,700 \$15,335 \$20,113 Total Nursing Salary and Fringe Benefits Expense per FTE \$107,077 \$107,425 \$114,349 N. Physician Salary and Fringe Expense per FTE 1 Physician Salary Expense per FTE \$311,785 \$311,975 \$315,138 Physician Fringe Benefits Expense per FTE \$59,496 \$59,836 \$67,400 2 Total Physician Salary and Fringe Benefits Expense per FTE 3 \$371,281 \$371,811 \$382,538 Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE Ο. Non-Nursing, Non-Physician Salary Expense per FTE \$58,359 \$59,146 \$58,768 1 Non-Nursing, Non-Physician Fringe Benefits Expense per FTE \$12,814 \$15,304 2 \$20,114 Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE \$71,173 \$74,450 \$78,882 3 Ρ. Total Salary and Fringe Benefits Expense per FTE Total Salary Expense per FTE \$75,612 \$76,380 1 \$76,225 2 Total Fringe Benefits Expense per FTE \$14,720 \$16,698 \$21,545 Total Salary and Fringe Benefits Expense per FTE \$92.923 \$97,926 \$90,332 3 Q. Total Salary and Fringe Ben. Expense per Statistic 1 Total Salary and Fringe Benefits Expense per Patient Day \$2,695 \$2,760 \$2,959 Total Salary and Fringe Benefits Expense per Discharge \$12,312 \$12,244 \$12,989 2 Total Salary and Fringe Benefits Expense per EPD \$927 3 \$952 \$930 Total Salary and Fringe Benefits Expense per ED \$4,067 4 \$4,347 \$4,123 Total Salary and Fringe Benefits Expense per CMAEPD \$734 \$687 \$674 5 \$3,048 6 Total Salary and Fringe Benefits Expense per CMAED \$3.355 \$2,960