HEALTH SERVICES COST REVIEW

SAINT AGNES HOSPITAL

FY 2018 Annual Filing

SUBMISSION

INPATIENTS AND PATIENT DAYS

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

			COL. 1	COL. 2	COL. 3	COL. 4	COL. 5	COL. 6
REPORTING SCHEDULE		CENTER	ADMISSIONS	PATIENT DAYS	INTRA- HOSPITAL TRANSFERS IN	LENGTH OF STAY	AVERAGE LICENSED BEDS	% OCCUPANCY
SOURCE			RECORDS	RECORDS	RECORDS	COL. 2/(COL. 1 + COL. 3)	RECORDS	COL 2/COL 5*365 (6)
D1	MSG	Med/Surg Acute	12,317	53,966	2,194	3.7	0	0.000
D2	PED	Pediatric Acute	0	0	0	0.0	0	0.000
D3	PSY	Psychiatric Acute	0	0	0	0.0	0	0.000
D4	OBS	Obstetrics Acute	1,912	5,308	341	2.4	0	0.000
		Definitive		-,,				
D5	DEF	Observation	0	0	0	0.0	0	0.000
		Med/Surg						
D6	MIS	Intensive Care	585	4,832	104	7.0	0	0.000
D7	CCU	Coronary Care	43	18	8	0.4	0	0.000
		Pediatric						
D8	PIC	Intensive Care	0	0	0	0.0	0	0.000
		Neo-Natal						
D9	NEO	Intensive Care	245	4,075	44	14.1	0	0.000
D10	BUR	Burn Care	0	0	0	0.0	0	0.000
		Psychiatric						
D11	PSI	Intensive Care	0	0	0	0.0	0	0.000
D12	TRM	Shock Trauma	0	0	0	0.0	0	0.000
D13	ONC	Oncology	0	0	0	0.0	0	0.000
D14	NUR	Newborn Nursery	1,875	4,796	334	2.2	xxxxxxxx	xxxxxxxx
D15	PRE	Premature Nursery	0	0	0	0.0	xxxxxxxx	xxxxxxxxx
		Skilled Nursing				0.0	70000000	70000000
D16	ECF	Care	0	0	0	0.0	0	0.000
		Intermediate						
D17	ICC	Chronic Care	0	0	0	0.0	0	0.000
D54	RHB	Rehabilitation	0	0	0	0.0	0	0.000
D70	PAD	Psych, Adult	0	0	0	0.0	0	0.000
		Psych, Child /						
D71	PCD	Adolescent	0	0	0	0.0	0	0.000
D73	PSG	Psych Geriatric	0	0	0	0.0	0	0.000
XXX		Subtotal	15,102	68,199	2,691	3.8	0	0.000
XXXXXX		Total	16,977	72,995	3,025	3.6	0	0.000

AMBULATORY VISITS

SCHEDULE V2

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

			COL. 1	COL. 2	COL, 3	COL. 4	COL. 5	COL. 6
REPORTING			INPATIENT	OUTPATIENT	TOTAL	INPATIENT	OUTPATIENT	TOTAL
SCHEDULE		CENTER	VISITS	VISITS	VISITS	RVUs	RVUs	RVUs
SOURCE			RECORDS	RECORDS	COL. 1 + COL. 2	RECORDS	RECORDS	COL. 4 + COL. 5
		Emergency						
D18	EMG	Services	10,348	74,566	84,914	152,099	559,739	711,838
D19	CL	Clinical Services	444	48,002	48,446	5,185	305,573	310,758
		Psych. Day &						
D20	PDC	Night Care	0	0	0	0	0	0
		Same Day						
D22	SDS	Surgery	0	5,526	5,526	0	0	0
		Free Standing						
D50	FSE	Emergency	0	0	0	0	0	0
D55	OBV	Observation	1,509	4,990	6,499	23,880	106,627	130,507
D58	OCL	Oncology Clinic	0	0	0	0	0	0
		Referred						
		Ambulatory						
N/A	PAP	Services	0	0	0	0	0	0

ANCILLARY SERVICE UNITS

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

				COL. 1	COL. 2	COL. 3
REPORTING			UNIT OF	INPATIENT	OUTPATIENT	TOTAL
SCHEDULE		CENTER	MEASURE	VOLUME	VOLUME	VOLUME
SOURCE				RECORDS	RECORDS	COL 1 + COL 2
		Labor & Delivery				
D23	DEL	Services	RVUs	80,330	23,650	103,98
D24	OR	Operating Room	Minutes	490,133	484,896	975,02
		Operating Room				
D24-A	ORC	Clinic	Minutes	9,808	47,579	57,38
D25	ANS	Anesthesiology	Minutes	1,043,535	435,049	1,478,58
DES	71110	Laboratory	Williatoo	1,010,000	100,010	1,1,0,00
D28	LAB	Services	MD. RVUs	10,755,427	7,265,464	18,020,89
DZO	LAB	Electrocardio-	IVID. IVVOS	10,733,427	7,203,404	10,020,03
B00	EKO		MD DV/II-	400.074	400,589	839,56
D30	EKG	graphy	MD RVUs	438,971	400,009	039,50
		Interventional				
		Radiology /			[
D31	IRC	Cardiovascular	Minutes	52,391	77,076	129,46
		Radiology-				
D32	RAD	Diagnostic	HSCRC RVUs	255,673	534,683	790,35
D33	CAT	CT Scanner	RVUs	445,555	742,466	1,188,02
		Radiology-				
D34	RAT	Therapeutic	HSCRC RVUs	39,140	922,695	961,83
		11.2.2				
D35	NUC	Nuclear Medicine	HSCRC RVUs	98,940	158,558	257,49
D35	NOC	Respiratory	TIOCINO INVOS	30,340	130,330	207,40
D00	DEO		MD RVUs	E 404 404	602.204	5.704.80
D36	RES	Therapy	MD RVUS	5,101,424	603,384	5,704,80
		Pulmonary				0.4.55
D37	PUL	Function Testing	CHA RVUs	863	30,688	31,55
		Electroencephalo				
D38	EEG	graphy	1974 Calif. RVUs	115,959	196,687	312,64
D39	PTH	Physical Therapy	MD RVUs	153,437	178,804	332,24
		Occupational				
D40	OTH	Therapy	RVUs	113,625	28,144	141,76
D40	OIII	Speech	11103	110,020	20,144	7.11,10
		Language				
D41	STH		RVUs	22,944	17,830	40,77
U41	SIR	Pathology	RVUS	22,944	17,030	40,77
		Recreational				
D42	REC	Therapy	Hours	0	0	
D43	AUD	Audiology	MD RVUs	12,558	7,638	20,19
		Other Physical				
D44	OPM	Medicine	Treatments	0	0	
D45	RDL	Renal Dialysis	Treatments	4,168	0	4,16
D46	OA	Organ Acquisition	Number	0	0	
		Ambulatory				
D47	AOR	Surgery	Surgery Minutes	o	0	
D48	LEU	Leukopheresis	JHH RVUs	0	0	
D40	LEU	Hyperbaric	JIIIIIVOS			
D.40	LIVE		Line of Tenedone and	4.0	202	22
D49	HYP	Chamber	Hrs of Treatment	18	302	32
		Magnetic		1		
		Resonance				
D51	MRI	Imaging	RVUs	231,637	173,621	405,25
D53	LIT	Lithotripsy	Procedures	0	4	
		Ambulance				
		Services-		1		
D56	AMR	Rebundled	HSCRC RVUs	0	0	
		Transurethral		-		
		Microwave		XI.		
DEZ	TRAT		Broodures	0	0	
D57	TMT	Thermotherapy	Procedures	U.	- 0	
		Transurethral			_	
D59	TNA	Needle Ablation	Procedures	0	0	
		Electroconv.				
D80	ETH	Therapy	Treatments	0	0	

EQUIVALENT INPATIENT DAYS AND ADMISSIONS

INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR 6/30/2018

INSTITUTION NUMBER:

0011

EQUIVALENT INPATIENT DAYS (EIPDs)	SOURCE	BASE YEAR
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INPATIENT DATA - BASE YEAR

COL. 1

Α	GROSS INPATIENT REVENUE	RECORDS, BUDGET	252,414.50	Α
В	INPATIENT GRANT REVENUE	RECORDS, BUDGET	0.00	В
С	TOTAL INPATIENT REVENUE	A + B	252,414.50	C
D	TOTAL INPATIENT DAYS (IPDs) EXCL NURSERY	SCH V 1 D	68,199	D
E	INPATIENT UNIT REVENUE	C/D	3.70	Е
F	GROSS OUTPATIENT REVENUE	RECORDS, BUDGET	186,281.40	F
G	OUTPATIENT GRANT REVENUE	RECORDS, BUDGET	0.00	G
Н	TOTAL OUTPATIENT REVENUE	F+G	186,281.40	Н
	TOTAL OUTPATIENT VISITS	SCH V 2 B	133,360	
J	OUTPATIENT UNIT REVENUE	H71	1.39683	J
K	IP/OP UNIT REVENUE RATIO	E/J	2.64968	K
L	INPATIENT EQUIVALENT OF OUTPATIENT VISITS	1/K	50,330.61	L
М	EQUIVALENT INPATIENT DAYS (EIPDs)	D+L	118,529.61	M

	EQUIVALENT INPATIENT ADMISSIONS (EIPAS)	SOURCE	BASE YEAR	
N	TOTAL INPATIENT ADMISSIONS (EXCL NURSERY)	SCH V 1 D	15,102	N
0	INPATIENT UNIT REVENUE	C/N	16.71	0
Р	OUTPATIENT UNIT REVENUE	H/I	1.39683	Р
Q	IP/OP UNIT REVENUE RATIO	O/P	11.96565	Q
R	INPATIENT EQUIVALENT OF OUTPATIENT VISITS	1/Q	11,145.24	R
S	EQUIVALENT INPATIENT ADMISSIONS (EIPAs)	N+R	26,247.24	U

INSTITUTION NAME Saint Agnes Hospital BASE YEAR 6/30/2018

	COL. 1 8830	COL, 2 8840	COL. 3 8880	COL, 4	COL. 5 8810	COL. 6 8820	COL. 7 8850	COL. 8 8860	COL 9 8870	COL. 10
			MEDICAL		DEPRECIATION	LEASES	LICENSE	INTEREST	INTEREST	
SOURCE	MALPRACTICE	OTHER	CARE	SUB-	&	&	&	SHORT	LONG	TOTAL
	INSURANCE	INSURANCE	REVIEW	TOTAL	AMORTIZATION	RENTALS	TAXES	TERM	TERM	EXPENSES

BASE YEAR DATA		MAL	OIN	MCR		DEP	LEA	LIC	IST	ILT	
A BASE YEAR EXPENSES	RECORDS	\$8,126.00	\$597.90	\$2,800.00	\$11,523.90	\$20,176.80	\$7,516.50	\$147.30	\$2,704.80	\$0.00	\$42,069.30 A
B ALLOCATIONS TO AUX. ENT.											В
& UNREG. SERVICES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	(\$2,129.74)	(\$4,909.60)	\$0.00	\$0.00	\$0.00	(\$7,039.34)
C BASE YEAR EXP ADJ.	A+B	\$8,126.00	\$597.90	\$2,800.00	\$11,523.90	\$18,047.06	\$2,606.90	\$147.30	\$2,704.80	\$0.00	\$35,029.96 C

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

INSTITUTION NUMBER: 0011

COL 1 COL 2 COL 3 COL 4 COL 5 COL 6 COL 7

COST CENTER	CODE	RESEARCH	CHIEF OF MEDICAL STAFF	MEDICAL CARE REVIEW	ADMINIS & SUPERVISION	PART B SERVICES	EDUCATION	TOTAL	
A1 MEDICAL SURGICAL ACUTE	MSG	0.0	0.0	0.0	702.0	0.0	448.7	1,150.7	A1
A2 PEDIATRIC ACUTE	PED	0.0	0.0	0.0	0.0	0.0	0.0	0.0	.A.2
A3 PSYCHIATRIC ACUTE	PSY	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A3
A4 OBSTETRICS ACUTE	OBS	0.0	0.0	0.0	159.5	0.0	0.0	159.5	A4
A5 DEFINITIVE OBSERVATION	DEF	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A5
A6 M/S INTENSIVE CARE	MIS	0.0	0.0	0.0	266.1	0.0	49.0	315.1	A6
A7 CORONARY CARE	ccu	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A7
A8 PEDIATRIC INTEN. CARE	PIC	0.0	0.0	0,0	0.0	0.0	0.0	0.0	AB
A9 NEO-NATAL INTEN. CARE	NEO	0.0	0.0	0.0	172.9	0.0	124.2	297.1	A9
A10 BURN CARE	BUR	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A10
A11 PSYCHIATRIC INTEN. CARE	PSI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A11
A12 SHOCK TRAUMA	TRM	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A12
A13 ONCOLOGY	ONC	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A13
A14 NEWBORN NURSERY	NUR	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A14
A15 PREMATURE NURSERY	PRE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A15
A16 REHABILITATION	RHB	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A16
A17 INTERMEDIATE CARE	icc	0,0	0.0	0.0	0.0	0.0	0.0	0.0	A17
A18 EMERGENCY SERVICES	EMG	0.0	0.0	0.0	529.4	0.0	367.9	897.3	A18
A19 CLINICAL SERVICES	CL	0.0	0.0	0.0	699.9	0.0	133.5	833.4	A19
A20 PSYCH DAY/NIGHT CARE	PDC	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A20
A21 AMBULATORY SURGERY(PBP)	AMS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A21
A22 SAME DAY SURGERY	SDS	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A22
A23 LITHOTRIPSY	LIT	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A23
A24 LABOR & DELIVERY SERVICES	DEL	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A24
A25 OPERATING ROOM	OR	0.0	0.0	0.0	1,659.6	0.0	752.2	2,411.8	A25
A26 OPERATING ROOM CLINIC	ORC	0.0	0.0	0.0	51.6	0.0	1.1	52.7	A26
A27 ANESTHESIOLOGY	ANS	0.0	0.0	0.0	87.3	0.0	18.4	105.7	A27
A28 LABORATORY SERVICES	LAB	0.0	0.0	0.0	450.2	0.0	368.3	818.5	A28
A30 ELECTROCARDIOGRAPHY	EKG	0.0	0.0	0.0	38.8	0.0	56.8	95.6	A30
A31 INTERVENTIONAL RADIOLOGY/CARDIOVASCULAR	IRC	0.0	0.0	0.0	193.8	0.0	272.4	466.2	A31
A32 RADIOLOGY-DIAGNOSTIC	RAD	0.0	0.0	0.0	162.2	0.0	0.0	162.2	A32
A33 CAT SCANNER	CAT	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A33

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

INSTITUTION NUMBER: 0011

COL 1 COL 2 COL 3 COL 4 COL 5 COL 6 COL 7

	COST CENTER	CODE	RESEARCH	CHIEF OF MEDICAL STAFF	MEDICAL CARE REVIEW	ADMINIS. & SUPERVISON	PART B SERVICES	EDUCATION	TOTAL	
A34	RADIOLOGY-THERAPEUTIC	RAT	0.0	0.0	0.0	76.6	0.0	0.0	76.6	A34
A35	NUCLEAR MEDICINE	NUC	0.0	0,0	0,0	0.0	0.0	0.0	0.0	A35
A36	RESPIRATORY THERAPY	RES	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A36
A37	PULMONARY FUNCTION TESTING	PUL	0.0	0.0	0.0	78.3	0.0	21.8	100.1	A37
A38	ELECTROENCEPHALOGRAPHY	EEG	0.0	0.0	0.0	17.7	0.0	91.8	109.5	A38
A39	PHYSICAL THERAPY	PTH	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A39
A40	OCCUPATIONAL THERAPY	отн	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A40
A41	SPEECH LANGUAGE PATH.	STH	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A41
A42	OBSERVATION	OBV	0.0	0.0	0.0	140.7	0.0	90.0	230.7	A42
A43	AUDIOLOGY	AUD	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A43
A44	OTHER PHYSICAL MEDICINE	ОРМ	0.0	.0.0	0.0	0.0	0.0	0.0	0.0	A44
A45	RENAL DIALYSIS	RDL	0.0	0.0	0.0	0.5	0.0	19.3	19.8	A45
A46	ORGAN ACQUISITION	OA	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A46
A47	AMBULATORY SURGERY	AOR	0.0	0.0	0.0	0.0	۵.۵	0.0	0.0	A47
A4B	LEUKOPHERESIS	LEU	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A4E
A49	HYPERBARIC CHAMBER	HYP	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A49
A50	FREE STANDING EMG SERV.	FSE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A50
A51	MEDICAL STAFF ADMINISTRATOR	MSA	0.0	0.0	0.0	0.0	0.0	0.0	0,0	A51
A52	POST GRADUATE MEDICAL EDUCATION	PME							0.0	A52
A53	MRI SCANNER MRI	MRI	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A53
A54	TRANSURETHAL MICROWAVE THERMOTHERAPY	TMT							0.0	A54

	8	TOTALS	inn	0.0	0.0	0.0	5,487.1	0.0	2,815.4	8,302.5	В
-		A CONTRACTOR OF THE CONTRACTOR									

Reporting Schedule

C Cost Center Schedule	- D56 P2A - P2G P4A - P5I ////////// C	D1 - D56	UA	C 13	F1	11111	C Cost Center Schedule
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INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR

6/30/2018

INSTITUTION NUMBER:

0011

		COL 1	COL. 2	COL 3	COL 4	COL 5	COL 6	COL 7		
	SOURCE	MEDICAL SURGICAL	PEDIATRIC	PSYCHIA- TRIC	OBSTETRIC	DEFINITIVE OBSERVA- TION	M/S INTENSIVE CARE	CORONARY CARE		
BASE YEAR DATA		MSG	PED	PSY	OBS	DEF	MIS	CCU		
A BASE YEAR WAGES & SALARIES	RECORDS	\$2,307.72	\$0.00	\$0.00	\$0.00	\$0.00	\$533.34	\$57.82	A	2,898.9
B BASE YEAR PHYSICIAN SUPERVISION	SCH. P1A	\$448.74	\$0.00	\$0.00	\$0.00	\$0.00	\$49.00	\$0.00	В	497.7
C BASE YEAR OTHER EXPENSES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	C	0.0
D TOTAL BASE YEAR EXPENSES	A+B+C	\$2,756.46	\$0.00	\$0.00	\$0.00	\$0.00	\$582.34	\$57.82	D	
E ALLOC FROM CAFE, PARKING, ETC.	SCH. OA	\$22.62	\$0.00	\$0.00	\$0.00	\$0.00	\$4.85	\$0.00	E	27.5
F BASE YEAR EXPENSES ADJUSTED	D+E	\$2,779.08	\$0.00	\$0.00	\$0.00	\$0.00	\$587.19	\$57.82	F	
VI (100 to 100 t										
INFLATION FACTORS			-						The same of	
G INFLATION FACTOR-WAGES & SALARIES	HSCRC								G	
H INFLATION FACTOR - OTHER	HSCRC								Н	
FTE DATA										
N BASE YR HOURS WORKED/2080 (A)	RECORDS	36.60	0.00	0.00	0.00	0.00	8.20	0.00	N	44.8
O BASE YR HOURS WORKED/2080 (B)	RECORDS	2 20	0.00	0.00	0.00	0.00	0.11	0.00	0	2.3
										0.0

INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR

6/30/2018

INSTITUTION NUMBER:

0011

		COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	
		PEDIATRIC	NEO-NATAL		PSYCH		U		
	SOURCE	INTENSIVE	INTENSIVE	BURN CARE	INTENSIVE	SHOCK	ONCOLOGY	NEWBORN	
		CARE	CARE		CARE	TRAUMA		NURSERY	Į.
BASE YEAR DATA		PIC	NEO	BUR	PSI	TRM	ONC	NUR	
A BASE YEAR WAGES & SALARIES	RECORDS	\$0.00	\$242.78	\$0.00	\$0.00	\$0.00	\$0.00	\$162.23	Α
BASE YEAR PHYSICIAN SUPERVISION	SCH. P1A	\$0.00	\$124.20	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	В
BASE YEAR OTHER EXPENSES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	С
TOTAL BASE YEAR EXPENSES	A+B+C	\$0.00	\$366.98	\$0.00	\$0.00	\$0.00	\$0.00	\$162.23	D
	0011 01	00.00	\$1.74	\$0.00	\$0.00	\$0.00	\$0.00	\$0.99	E
E ALLOC. FROM CAFE, PARKING, ETC.	SCH_OA	\$0.00	51.74	90.00	30.00	40.00	40.00	WU.33	
	D+E	\$0.00	\$368.72	\$0.00	\$0.00	\$0.00	\$0.00	\$163.22	F
F BASE YEAR EXPENSES ADJUSTED									F
BASE YEAR EXPENSES ADJUSTED INFLATION FACTORS	D+E								
F BASE YEAR EXPENSES ADJUSTED INFLATION FACTORS INFLATION FACTOR-WAGES & SALARIES									F
F BASE YEAR EXPENSES ADJUSTED INFLATION FACTORS G INFLATION FACTOR-WAGES & SALARIES	D+E								
G INFLATION FACTOR-WAGES & SALARIES H INFLATION FACTOR - OTHER	D+E HSCRC								G
INFLATION FACTORS G INFLATION FACTOR-WAGES & SALARIES H INFLATION FACTOR - OTHER FTE DATA	D+E HSCRC HSCRC	\$0.00	\$368.72	\$0.00	\$0.00	\$0.00	\$0,00	\$163.22	G H
F BASE YEAR EXPENSES ADJUSTED INFLATION FACTORS G INFLATION FACTOR-WAGES & SALARIES H INFLATION FACTOR - OTHER	D+E HSCRC								G H

 INSTITUTION NAME:
 Saint Agnes Hospital
 BASE YEAR
 6/30/2018

		COL 1	COL 2	COL 3	COL 4	COL. 5	COL 6	COL 7	
	SOURCE	PREMATURE NURSERY	SAME DAY SURGERY	INTERMEDIATE CARE	EMERGENCY SERVICES	CLINIC SERVICES	PSYCH DAY/NIGHT CARE	AMBULATORY SURGERY (PBP)	
BASE YEAR DATA		PRE	SDS	ICC	EMG	CL	PDC	AMS	
BASE YEAR WAGES & SALARIES	TRECORDS	\$0.00	\$0.00	\$0.00	\$135.10	\$117.96	\$0.00	\$0,00 A	25
BASE YEAR PHYSICIAN SUPERVISION	SCH. P1A	\$0.00	\$0.00	\$0.00	\$367.90	\$133,50	\$0.00	\$0.00 B	50
BASE YEAR OTHER EXPENSES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 C	
TOTAL BASE YEAR EXPENSES	A+B+C	\$0.00	\$0.00	\$0.00	\$503.00	\$251.46	\$0.00	\$0.00 D	
ALLOC, FROM CAFE, PARKING, ETC.	SCH. OA	\$0.00	\$0.00	\$0.00	\$2.75	\$1.08	\$0.00	E	
BASE YEAR EXPENSES ADJUSTED	D+E	\$0.00	\$0.00	\$0.00	\$505.75	\$252.53	\$0.00	\$0.00 F	
WE ATION 5407000									
INFLATION FACTORS									
	HSCRC							G	
INFLATION FACTOR-WAGES & SALARIES	HSCRC HSCRC							<u></u>	
INFLATION FACTOR-WAGES & SALARIES								н	
S INFLATION FACTOR-WAGES & SALARIES INFLATION FACTOR - OTHER		0.00	0.00	0.00	2.20	1.40	0.00	Н	

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

		COL. 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	
	SOURCE	MRI SCANNER	LABOR & DELIVERY	OPERATING ROOM	OPERATING ROOM	ANESTHES-	LABORATORY	ELECTRO- CARDIO- GRAPHY	
BASE YEAR DATA		MRI	DEL	OR	ORC	ANS	LAB	EKG	
A BASE YEAR WAGES & SALARIES	RECORDS	\$0.00	\$0.00	\$467.72	\$0.00	\$68.94	\$215.62	\$97.26 A	849.5
B BASE YEAR PHYSICIAN SUPERVISION	SCH. P1A	\$0.00	\$0.00	\$752.20	\$1.10	\$18.40	\$368,30	\$56.80 B	1,196.8
C BASE YEAR OTHER EXPENSES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 C	0.0
D TOTAL BASE YEAR EXPENSES	A+B+C	\$0.00	\$0.00	\$1,219.92	\$1.10	\$87.34	\$583.92	\$154.06 D	
E ALLOC. FROM CAFE, PARKING, ETC.	SCH. OA	\$0.00	\$0.00	\$5.45	\$0.00	\$0.72	\$2.47	\$0.99 E	9.6
F BASE YEAR EXPENSES ADJUSTED	D+E	\$0.00	\$0.00	\$1,225.38	\$1.10	\$88.06	\$586.39	\$155.05 F	
INFLATION FACTORS									
G INFLATION FACTOR-WAGES & SALARIES	HSCRC							G	
H INFLATION FACTOR - OTHER	HSCRC							H	
FTE DATA									
N BASE YR HOURS WORKED/2080 (A)	RECORDS	0.00	0.00	7.80	0.00	1.20	3.40	1.60 N	14.0
O BASE YR HOURS WORKED/2080 (B)	RECORDS	0.00	0.00	1.55	0.01	0.04	0.84	0.10	2.5
									0.0

INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR

6/30/2018

INSTITUTION NUMBER:

0011

		COL 1	COL 2	COL. 3	COL 4	COL 5	COL 6	COL.7	
		INTERVENTIONAL				305-03/25	7.00	PULMONARY	
	SOURCE	RADIOLOGY/	RADIOLOGY	CT	RADIOLOGY	NUCLEAR	RESPIRATORY	FUNCTION	
		CARDIOVASCULA	DIAGNOSTIC	SCANNER	THERAPEUTIC	MEDICINE	THERAPY	TESTING	
BASE YEAR DATA	10	IRC	RAD	CAT	RAT	NUC	RES	PUL	
A BASE YEAR WAGES & SALARIES	RECORDS	\$8.85	\$0.00	\$0.00	\$0.00	\$20.51	\$0.00	\$125.72 A	15
B BASE YEAR PHYSICIAN SUPERVISION	SCH. P1A	\$272.40	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$21.80 E	29
BASE YEAR OTHER EXPENSES	RECORDS	\$0.00	\$0.00	\$0.00	\$0,00	\$0.00	\$0.00	\$0,00 (
TOTAL BASE YEAR EXPENSES	A+B+C	\$281.25	\$0.00	\$0.00	\$0.00	\$20.51	\$0.00	\$147.52	
ALLOC, FROM CAFE, PARKING, ETC.	SCH_OA	\$0.35	\$0.00	\$0.00	\$0.00	\$0.17	\$0.00	\$1.20 E	
BASE YEAR EXPENSES ADJUSTED	D+E	\$281.60	\$0.00	\$0.00	\$0.00	\$20.68	\$0.00	\$148.72 F	: .
INITI ATION FACTORS									
INFLATION FACTORS									-
INFLATION FACTOR-WAGES & SALARIES	HSCRC								
I INFLATION FACTOR - OTHER	HSCRC							L.	1
FTE DATA									
N BASE YR HOURS WORKED/2080 (A)	RECORDS	0.10	0.00	0.00	0.00	0.30	0.00	2.00 M	i :
BASE YR HOURS WORKED/2080 (B)	RECORDS	0.50	0.00	0.00	0.00	0.00	0.00	0.05	
O [BASE YR HOURS WORKED/2080 (B)	IRECORDS	0.50	0.00	0.00	0.00]	0.00	0.00	0.05 0	2

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

		COL 1	COL. 2	COL. 3	COL 4	COL 5	COL 6	COL 7	
	SOURCE	ELECTRO- ENCEPHALO- GRAPHY	PHYSICAL THERAPY	OCCUPATIONAL	SPEECH LANGUAGE	OBSERVATION	AUDIOLOGY	OTHER PHYSICAL MEDICINE	
BASE YEAR DATA		EEG	PTH	OTH	STH	OBV	AUD	OPM	
A BASE YEAR WAGES & SALARIES	RECORDS	\$47.49	\$0.00	\$0.00	\$0.00	\$498.68	\$0.00	\$0.00 A	54
B BASE YEAR PHYSICIAN SUPERVISION	SCH P1A	\$91.80	\$0.00	\$0.00	\$0.00	\$89.96	\$0.00	\$0,00 B	18
BASE YEAR OTHER EXPENSES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 C	
D TOTAL BASE YEAR EXPENSES	A+B+C	\$139.29	\$0.00	\$0.00	\$0.00	\$588.65	\$0.00	\$0.00 D	
ALLOC, FROM CAFE, PARKING, ETC.	SCH. OA	\$0.67	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 E	
F BASE YEAR EXPENSES ADJUSTED	D+E	\$139.96	\$0.00	\$0.00	\$0.00	\$588.65	\$0.00	\$0.00 F	
INFLATION FACTORS		- 10							
G INFLATION FACTOR-WAGES & SALARIES	HSCRC							G	
H INFLATION FACTOR - OTHER	HSCRC							Н	
FTE DATA									
FTE DATA N BASE YR HOURS WORKED/2080 (A)	RECORDS	0.80	0.00	0.00	0.00	7.60	0.00	0.00 N	

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

No.		COL 1	COL 2	COL 3	COL 4	COL. 5	COL 6	COL 7	
	SOURCE	RENAL	ORGAN	AMBULATORY	LEUKO-	HYPERBARIC	FREE STANDING	LITHO-	
L,		DIALYSIS	AQUISITION	SURGERY	PHERESIS	CHAMBER	CLINIC	TRIPSY	
BASE YEAR DATA		RDL	OA	AOR	LEU	HYP	FSE	LIT	
BASE YEAR WAGES & SALARIES	RECORDS	\$44.33	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 A	44
BASE YEAR PHYSICIAN SUPERVISION S	SCH. P1A	\$19.30	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 B	19
BASE YEAR OTHER EXPENSES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 C	
	A+B+C	\$63.63	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 D	
ALLOC FROM CAFE, PARKING, ETC.	SCH. OA	\$0.43	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 E	
	D+E	\$64.06	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 F	
INFLATION FACTORS									
INFLATION FACTOR-WAGES & SALARIES	HSCRC							G	
I INFLATION FACTOR - OTHER	HSCRC							H_	
FTE DATA									
BASE YR HOURS WORKED/2080 (A)	RECORDS	0.70	0.00	0.00	0.00	0.00	0.00	0.00 N	
	RECORDS	0.04	0.00	0.00	0.00	0.00	0.00	0.00	

 INSTITUTION NAME:
 Saint Agnes Hospital
 BASE YEAR
 6/30/2018

		COL. 1	COL. 2	COL 3	COL 4	COL 5	COL 6	COL. 7	
					TRANSURETHRAL	Ţ	RANSURETHRAL		
	SOURCE	RÉHABIL-	ADULT	CHILD/ADOL	MICROWAVE	GERIATRIC	NEEDLE	ONCOLOGY	
		ITATION	PSYCH	PSYCH	THERMOTHERAPY	PSYCH	ABLATION	CLINIC	
BASE YEAR DATA		RHB	PAD	PCD	TMT	PSG	TNA	OCL	
A BASE YEAR WAGES & SALARIES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	A
B BASE YEAR PHYSICIAN SUPERVISION	SCH P1A	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	В
C BASE YEAR OTHER EXPENSES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	C
D TOTAL BASE YEAR EXPENSES	A+B+C	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	D
E ALLOC. FROM CAFE, PARKING, ETC.	SCH OA	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	E
F BASE YEAR EXPENSES ADJUSTED	D+E	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	F
SAVALE PROBLEMS OF EXPRESS WHATEN	D+E	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0,00	F
F BASE YEAR EXPENSES ADJUSTED INFLATION FACTORS	D+E	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0,00	F
SAVALE PROBLEMS OF EXPRESS WHATEN	D+E HSCRC	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00 [\$0.00	\$0,00	_
INFLATION FACTORS		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0,00	G H
INFLATION FACTORS G INFLATION FACTOR-WAGES & SALARIES	HSCRC	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	G
INFLATION FACTORS G INFLATION FACTOR-WAGES & SALARIES	HSCRC	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0,00	G
INFLATION FACTORS G INFLATION FACTOR-WAGES & SALARIES H INFLATION FACTOR - OTHER	HSCRC	0.00	\$0.00	\$0.00	\$0.00	0.00	\$0.00	\$0,00	G H

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2016

	44	COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	
	SOURCE	INDIVIDUAL THERAPY	GROUP THERAPY	PSYCH TESTING	EDUCATION	OTHER THERAPIES	ACTIVITY THERAPY	TOTAL EXPENSES	
BASE YEAR DATA	-	(TH	GTH	PST	PSE	OPT	ATH		
A BASE YEAR WAGES & SALARIES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$5,152.07	A 5,152,1
B BASE YEAR PHYSICIAN SUPERVISION	SCH P1A	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$2,815,40	B 2,815.4
C BASE YEAR OTHER EXPENSES	RECORDS	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		С
D TOTAL BASE YEAR EXPENSES	A+B+C	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$7,967.47	0.0
E ALLOC. FROM CAFE, PARKING, ETC.	SCH. OA	\$0.00	\$0.00	\$0.00	\$0,00	\$0.00	\$0.00	\$46.49	E 0,0
F BASE YEAR EXPENSES ADJUSTED	D+E	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$8,013.96	F 0.0
INFLATION FACTORS									
G INFLATION FACTOR-WAGES & SALARIES	HSCRC							0.00	G
H INFLATION FACTOR - OTHER	HSCRC							0.00	H
FTE DATA							414		
N BASE YR HOURS WORKED/2080 (A)	RECORDS	0.00	0.00	0.00	0.00	0.00	0.00	78.20	
O BASE YR HOURS WORKED/2080 (B)	RECORDS	0.00	0.00	0.00	0.00	0.00	0.00	9.57	0

GENERAL SERVICE CENTERS

SCHEDULE C

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

				COL. 1	COL. 2	COL. 3	COL. 4	COL. 5	COL. 6	COL. 7	COL. 8	COL. 9
FORM		CENTER	UNIT OF MEASURE	UNITS	WAGES, SALARY & BENEFITS	OTHER EXPENSES	TOTAL EXPENSES	ALLOCATION TO AUX ENT, OIP & URs	ALLOCATED EXPENSES	ADJUSTED TOTAL EXPENSES	EXPENSE PER UNIT	FTEs
SOURCE		OLIVILIA		RECORDS	RECORDS	RECORDS	Col. 2 + Col. 3	RECORDS	Sch. OADP	Cal. 4 + Cal. 5 + Cal. 6	Col. 6/Col. 1	RECORDS
C1	DTY	Dietary Services	Meals	209,327.0	\$0.0	\$1,695.5	\$1,695.5	\$0.0	\$0.00	\$1,695.50	\$8.10	0.0
C2	LL	Laundry & Linen	Pounds	2,489,032,0	\$607.9	\$1,598.8	\$2,206.7	\$0.0	\$9,43	\$2,216.13	\$0.89	16.2
C3	SSS	Social Services	Admissions	15,102.0	\$753.5	\$185.1	\$938.6	\$0.0	\$5.68	\$944.28	\$62.53	9.7
C4	PUR	Purchasing & Stores	EIPD	118,529.6	\$206.1	\$2,052.1	\$2,258.2	\$0.0	\$2,437.72	\$4,695.92	\$39.62	3.556
C5	POP	Plant Operations	Sq. Feet	827,691.0	\$1,821.5	\$9,700.4	\$11,521.9	\$0.0	\$19.41	\$11,541.31	\$13.94	33.3
C6	HKP	Housekeeping	Sq. Feet	745,166.0	\$0.0	\$5,717.9	\$5,717.9	\$0.0	\$0.00	\$5,717.90	\$7.67	0.0
C7 C8	CSS	Central Services & Supply Pharmacy	EIPA EIPA	26,247.2 26,247.2	\$2,351.2 \$4,797.1	\$190.8 \$103.5	\$2,542.0 \$4,900.6	\$0.0 \$0.0	\$24.53 \$24.70	\$2,566.53 \$4,925.30	\$97.78 \$187.65	42.1 42.4
C9	FIS	General Accounting	EIPD	118,529.6	\$793.6	\$662.5	\$1,456.1	\$0.0	\$1,007.06	\$2,463.16	\$20.78	5.4
C10	PAC	Patient Accounts	# Pt. Days & OP Visits	201,559.0	\$4,484.9	\$1,566.1	\$6,051.0	\$0.0	\$10,875.15	\$16,926.15	\$83.98	79.5
C11	MGT	Hospital Administration	EIPD	118,529.6	\$10,610.7	\$26,567.6	\$37,178.3	\$0.0	\$33.36	\$37,211.66	\$313.94	57.2
C12	MRD	Medical Records	Discharge & 1/8 OP Visits	31,772.0	\$3,203.4	\$547.1	\$3,750.5	\$0.0	\$1,144.97	\$4,895.47	\$154.08	44.4
C13	MSA	Medical Staff Administration	EIPD	118,529.6	\$1,241.9	\$163,6	\$1,405.5	\$0.0	\$5.24	\$1,410.74	\$11.90	9.0
C14	NAD	Nursing Administration	Hours of Personnel	1,503,808.0	\$5,675.0	\$1,219.0	\$6,894.0	\$0.0	\$21.01	\$6,915.01	\$4.60	36.0
C15	OAO	Organ Acquisition Overhead	Number		\$0.00	\$0,00	\$0.00	\$0.0	\$0.00	\$0.00	\$0.00	0.0

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

		1	COL. 1	COL 2 WAGES,	COL 3 PHYSICIAN	COL 4	COL.5	COL 6	COL 7 ADJUSTED	COL. 8	COL 9	COL 10 PHYSICIAN
FORM		CENTER	UNITS	SALARY & BENEFITS	SUPERVISION EXPENSES	OTHER EXPENSES	TOTAL EXPENSES	ALLOCATED EXPENSES	TOTAL EXPENSES	EXPENSE PER UNIT	FTEs	SUPERVISION FTEs
SOURCE			RECORDS	RECORDS	RECORDS	RECORDS	Cal. 2 + Cal. 3 +Cal.4	Sch OADP	Col 5 • Col 6	Col 7/Col 1	RECORDS	RECORDS
D1	MSG	Med/Surg Acute	53966	525.264.8	\$701.97	\$1,279 0	\$27,245.8	5151.82	\$27,397.59	\$507.68	260.37	1.81
D2	PED	Pediatric Acute	0	\$0.0		\$0.0		\$0.00	50.00	\$0.00	0.00	0.00
D3	PSY	Psychiatric Acute	0	\$0.0	\$0.00	\$0.0	\$0.0	\$0.00	\$0.00	\$0.00	0.00	0.00
D4	OBS	Obstetrics Acute Definitive	5308	\$2,036.6	\$159.50	\$90.6	\$2,286,7	\$11.81	\$2,298 51	\$433.03	20.25	0.48
D5	DEF	Observation Med/Surg	0	\$0.0	50.00	50.0	\$0.0	\$0.00	\$0,00	\$0,00	0.00	0.00
D6	MIS	Intensive Care	4832	\$5,766 B	5266.10	\$336.5	\$6 369.4	\$27.54	\$6.396.94	\$1,323,87	47.23	0.66
D7	CCU	Coronary Care	18	\$14.6	\$0.00	SO 0		\$0.00	514.60	\$811.10	(0.00)	0.00
01		Pediatric		314.0	50.00	50.0	319,0	50.00	514.00	3011.10	[0.00]	0.00
D8	PIC	Intensive Care Neo-Natal	0	\$0.0	\$0.00	\$0.0	50.0	\$0.00	\$0.00	\$0,00	0.00	0.00
D9	NEO	Intensive Care	4075	\$2,801.0	\$172.90	\$235.2	\$3,209.1	\$13.88	\$3,222.98	\$790.92	23.80	0.56
D10	BUR	Burn Care Psychiatric	0	50.0	S0 00	\$0.0	\$0.0	\$0.00	\$0.00	\$0.00	0,00	0,00
D11	PSI	Intensive Care	o	\$0.0	\$0.00	\$0.0	S0 0	\$0,00	\$0.00	\$0.00	0.00	0.00
D12	TRM	Shock Trauma	0	\$0.0		\$0.0		\$0.00	\$0.00	50.00	0.00	0.00
D13	ONC	Oncology	0	50.0	\$0.00	\$0.0		\$0.00	\$0.00	50.00	0.00	0.00
D14	NUR	Newborn Nursery	4796	\$1,248.3	\$0.00	\$7.4	\$1,255.7	\$6.66	\$1,262.36	\$263 21	11,42	0.00
D15	PRE	Premature Nursery	0	50.0	\$0.00	\$0.0	S0 0	\$0.00	\$0.00	SO 00	0.00	0.00
D16	ECF	Skilled Nursing Care	0	\$0.0	\$0.00	\$0.0	\$0.0	\$0.00	\$0.00	\$0.00	0.00	0.00
D17	ICC	Intermediate Care Emergency	0.	\$0.0	\$0.00	S0 0	\$0.0	\$0.00	\$0.00	\$0.00	0.00	0.00
D18	EMG	Services	711838	\$11,075.4	\$529.40	\$1,055.3	\$12,660.1	\$76.19	\$12,736.29	\$17.89	130.66	4.07
D19	CL	Clinical Services Psych, Day &	310758	\$3,677.2	\$699.90	5969 2	\$5,346.3	\$21.81	\$5,368,11	\$17.27	37,41	1.69
D20	PDC	Night Care Same Day	0	\$0.0	\$0.00	\$0.0	\$0.0	\$0.00	\$0.00	\$0.00	0.00	0.00
D22	SDS	Surgery	5526	\$1,355.8	\$0.00	\$32.2	\$1,388.0	\$8.96	\$1,396.96	\$252.80	15.36	0.00
D23	DEL	Labor & Delivery Services	103980	\$4,314.2	SO 00	\$195.1	\$4,509.3	\$25.09	\$4,534.39	\$43.61	43.03	0.00
D24	OR	Operating Room	975029	\$7.530.0	\$1,659.60	\$3,768.8	\$12.958.4	\$55.33	\$13.013.73	\$13.35	94.89	3.06
		Operating Room										
D24-A	ORC	Clinic	57387	\$366.7	\$51.60	\$261.7	\$680.0	\$2.13	\$682.13	\$11.89	3.66	0.25
D25	ANS	Anesthesiology Med/Surg	1478584	\$252.4	587.30	\$688.1	\$1.027.8	\$2.84	\$1,030.64	\$0.70	4 87	0.18
D26	MSS	Supplies	26247	\$0.0	\$0.00	\$20,788.3	\$20,788.3	\$0.00	\$20,788.30	\$792 02	0.00	0.00
D27	CDS	Drugs Sold	26247	50.0		\$15.540.1		\$0.00	\$15.540.10	5592 07	0.00	0.00
1,1,2		Laboratory		21000			0.0000000000000000000000000000000000000					
D28	LAB	Services Electrocardiogra	18020891	\$11,880.9	\$450.20	\$5,071.4	\$17,402.5	\$1,145.76	\$18,548.26	\$1.03	130 56	1.03
D30	EKG	phy	839560	\$1,224.1	538 80	\$306.0	\$1,568.9	\$9.12	\$1,578.02	\$1.88	15.64	0.07
D31	IRC	Interventional Radiology/Cardio vascular	129467	\$3,419.7	\$193.80	5849.1	54,462 6	\$17.98	54,480.58	\$34.61	30 84	0.36
		Radiology-					1720					
D32	RAD	Diagnostic	790356	\$4,943.1	\$162.20	\$441.2		\$27,87	\$5,574.37	\$7.05	47.80	0.32
D33	CAT	CT Scanner	1188021	\$1.089.7	50.00	\$351.7	\$1,441.4	\$8.77	\$1,450.17	\$1.22	15.04	0.00

0.00

0.00

0.00

INSTITUTION NAME:

Saint Agnes Hospital

Electrocony.

Therapy

ETH

D81 ATH Activity Therapy

BASE YEAR

6/30/2018

\$0.00

\$0.00

50.00

S0.00

50.0

INSTITUTION NUMBER: 0011 COL 2 WAGES, COL 3 PHYSICIAN COL 4 COL. 5 COL 6 COL 7 COL 8 COL 9 COL 1 **ADJUSTED** PHYSICIAN SALARY & SUPERVISION OTHER TOTAL ALLOCATED TOTAL **EXPENSE** SUPERVISION EXPENSES EXPENSES **EXPENSES** EXPENSES **EXPENSES** PER UNIT FTEs FTEs FORM CENTER UNITS BENEFITS RECORDS Col 2 + Col 3 + Col 4 Sch OADP Cal 5 + Cal 6 Cal 7/Cal 1 RECORDS SOURCE RECORDS RECORDS RECORDS Radiology-\$3,827.95 15 87 0.00 RAT 961835 \$1,938.3 \$76.60 51,803 B \$3,818.7 \$9.25 \$3.98 D34 Therapeutic 53.7 8 21 0.00 \$955 69 D35 NUC Nuclear Medicine 257498 \$830.5 \$0.00 \$120.4 \$950.9 54.79 \$5,502.29 \$0.96 46.47 0.00 \$5,475.2 527 09 \$4,648.5 50.00 \$826.7 D36 Therapy 5704808 Pulmonary \$11.07 2.33 0.18 \$266.2 \$78.30 \$347.8 S1.36 \$349.16 D37 PUL Function Testing 31551 53.3 Electroencepha 51.17 5744 67 \$2.38 2.00 0.07 EEG 312646 \$181.9 \$17.70 5543 9 \$743.5 D38 D39 PTH Physical Therapy 332241 \$2 247 7 \$0.00 S223 2 \$2,470.9 \$13.54 52 484 44 \$7.48 23 21 0.00 Occupational \$14.1 \$760.0 \$4.69 \$764 69 \$5.39 8.04 0.00 отн 141769 5745.9 \$0.00 D40 Therapy Language \$0.5 \$269.1 \$1.37 5270.47 \$6 63 2.35 0.00 D41 STH Pathology 40774 5268 6 \$0.00 Recreational 0.00 REC Therapy 0.00 50.59 5112.69 \$5.58 1.01 D43 AUD Audiology 20196 \$90.6 \$0.00 \$21.5 5112.1 Other Physical \$0.00 \$0.50 50.0 \$0,0 50.00 0.00 Medicine \$1,676.1 \$1,676.6 50.00 \$1,676.60 \$402.26 0.00 0.00 D45 RDL Renal Dialysis 4168 50.0 Organ 0.00 0.00 \$0.0 50.00 50.0 \$0.0 \$0.00 \$0:00 50.00 D46 OA Acquisition Ambulatory 0.00 Surgery \$0.00 0.00 D48 LEU 0 50.0 \$0,00 \$0.0 \$0.0 \$0.00 \$0.00 50.00 0.00 0.00 Leukopheresis Hyperbaric \$540.31 51729 \$172.9 \$0.00 \$172.90 0.00 0.00 D49 HYP Chamber 320 50.0 \$0.00 Free Standing \$0.00 50.00 \$0.00 0.00 0.00 D50 \$0.0 \$0.00 \$0.0 S0.0 Emergency Magnetic Resonance \$706.2 405258 \$497.0 5709.16 Imaging \$2.800.00 0.00 0.00 511.2 S11.2 \$0.00 \$11.20 LIT \$0.0 \$0.00 D53 Lithotripsy 50.0 50.0 50.00 \$0.00 50.00 0.00 0.00 D54 RHB Rehabilitation 130507 \$6.548 31 0.36 56,150.4 \$140,73 D55 OBV Observation Ambulance Services-0.00 AMR \$0.00 \$0.0 \$0.00 \$0.00 \$0.00 0.00 D56 Rebundled \$0.0 \$0.0 Transurethral 0.00 TMT Thermotherapy 0.00 0.00 \$0.00 \$0.00 D58 OCL Oncology Clinic \$0.0 \$0.00 50.0 \$0.0 \$0.00 0.00 TNA Needle Ablation \$0.00 0.00 0.00 50.00 0 50.00 D70 PAD Psych, Adult \$0.0 \$0.00 50.0 \$0.0 Psych, Child / \$0.00 S0.0 50.0 Adolescent \$0.00 0.00 0.00 \$0.0 \$0.00 50.0 \$0.0 PSG D73 Psych, Geriatric Individual 50.00 \$0.00 50.00 0.00 0.00 ITH 50.0 50.00 50.0 \$0.0 D74 Therapies 0.00 0.00 50.00 50.00 \$0.00 D75 GTH Group Therapies 50.0 50.00 \$0.0 \$0.0 0.00 0.00 \$0.00 50.0 50.0 \$0.00 \$0.00 50.00 50.0 D76 FTH Family Therapies Psychological 0.00 0.00 Testing 50.0 \$0.00 50 00 \$0.00 0.00 0.00 \$0.00 50.0 D78 Education \$0.0 Ó 50.0 \$0.00 50.0 \$0.0 SO 00 0.00 0.00 D79 OPT Other Therapies

SO 00

50.00

50.0

\$0.0

INSTITUTION NAME:		Saint Agnes Hosp	ital	E	BASE YEAR	,	6/30/2018	=
INSTITUTION NUMB	ER:	0011		E	BUDGET YEAR		1/0/1900	2
VOLUME DATA	BASE YEAR UNITS	BUDGET YEAR UNITS]					
A Sq Feet	ONTO							
15.1.54		-,1		COL 1	COL 2	COL. 3	COL. 4	
OFFICE & OTH	ER RENTAL - 9220	9210	SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES REVENUE	EXPENSE REVENUE PER UNIT	
BASE YEAR DA	ATA				***************************************			-
B BASE YEAR EX	PENSES		RECORDS	0.01	108.6	108.6	XXXXX	В
	ROM CAFETERIA, PA	RKING ETC.	SCH OAC	0.0	XXXXX	0.0	XXXXX	C
	ROM GENERAL SER		1111	XXXXX	XXXXX	XXXXX	XXXXX	D
	ST CENTER	COL 6 CODE	1111	XXXXX	XXXXX	XXXXX	XXXXX	1111
D1 Depreciation &		DEP		XXXXX	364.7	364.7	XXXXX	D1
D2						0.0	XXXXX	D2
D3						0.0	XXXXX	D3
D4		1				0.0	XXXXX	D4
D5		1				0.0	XXXXX	D5
D6						0.0	XXXXX	D6
D7		+	+			0.0	XXXXX	D7
						0.0	XXXXX	DB
D8						0.0	XXXXX	D9
D9						0.0	XXXXX	D10
D10						0.0	XXXXX	D11
D11			-					
D12						0.0	XXXXX	D12
	ITIES ALLOWANCE		SCH H3		0.0	0.0	XXXXX	E
F DONATED SER	VICES & COMMODITI	ES	RECORDS	0.0	0.0	0.0	XXXXX	F
G BASE YEAR AD	JUSTED EXPENSES		B+C+D+E+F	0.0	473.3	473.3	0.00000	G
BASE YEAR PE	ROFIT (LOSS)							
H BASE YEAR RE	VENUE		TRECORDS	XXXXX	XXXXX	48.0	XXXXX	H
I PROFIT (LOSS			H-G	XXXXX	XXXXX	(425.3)	XXXXX	TI
	TED AS FRINGE		RECORDS	XXXXX	XXXXX	0.0	XXXXX	J
K AMOUNT TREA			II-J	XXXXX	XXXXX	(425.3)	XXXXX	K
BUDGET YEAR	DATA							
L INFLATION			IHSCRC				XXXXX	L
	US ADJUSTMENTS		BUDGET				XXXXX	M
N BUDGET YEAR			G+L+M	0.0	473.3		XXXXX	N
	PROFIT (LOSS)							
BUDGET YEAR								To
	VENUE		RECORDS	XXXXX	XXXXX		XXXXX	0
O BASE YEAR RE			RECORDS	XXXXX	XXXXX		XXXXX	P

FTE DATA		
S BASE YR HOURS WORKED/2080	RECORDS	0.0
T DUDGET VD HOUDS/2090	BUDGET	

REO

INSTITUTION NAME: BASE YEAR 6/30/2018 Saint Agnes Hospital BUDGET YEAR 1/0/1900 0011 INSTITUTION NUMBER: VOLUME BASE YEAR BUDGET YEAR DATA UNITS UNITS 0 500 Sq Feet COL. 1 COL 2 COL 3 COL 4 TOTAL EXPENSE WAGES SALARIES **RETAIL OPERATIONS - 9230** OTHER **EXPENSES** REVENUE 9130 SOURCE & FRINGE PER UNIT BENEFITS **EXPENSES** REVENUE **BASE YEAR DATA** B BASE YEAR EXPENSES
C ALLOCATION FROM CAFETERIA, PARKING, ETC.
D ALLOCATION FROM GENERAL SERVICE CENTER
/// COL. 5 COST CENTER COL 6 COL RECORDS 185.6 202.1 387.7 XXXXX XXXXX C SCH OAC 2.1 2.1 XXXXX XXXXX XXXXX D /// Ш XXXXX XXXXX XXXXX XXXXX COL 6 CODE 1111 XXXXX XXXXX XXXXX D1 D1 D2 0.0 XXXXX XXXXX D3 0.0 D3 D4 D5 0.0 D4 XXXXX 0.0 D5 XXXXX D6 D6 0.0 XXXXX D7 D8 0.0 XXXXX D8 0.0 XXXXX D9 D9 D10 0.0 XXXXX D10 D11 0.0 XXXXX D11 0.0 XXXXX D12 D12 0.0 0.0 XXXXX E E CAPITAL FACILITIES ALLOWANCE SCH H3 F DONATED SERVICES & COMMODITIES 0.0 RECORDS 0.0 0.0 XXXXX B+C+D+E+F 389.8 0.77954 G G BASE YEAR ADJUSTED EXPENSES BASE YEAR PROFIT (LOSS) н H BASE YEAR REVENUE
I PROFIT (LOSS)
J AMOUNT TREATED AS FRINGE RECORDS XXXXX XXXXX 430.1 XXXXX IH-G XXXXX XXXXX 40.4 XXXXX J RECORDS XXXXX XXXXX 0.0 XXXXX K AMOUNT TREATED AS OFC XXXXX XXXXX 40.4 XXXXX **BUDGET YEAR DATA** L INFLATION HSCRC XXXXX M MISCELLANEOUS ADJUSTMENTS M BUDGET XXXXX 187.7 202,1 N BUDGET YEAR EXPENSES G+L+M XXXXX **BUDGET YEAR PROFIT (LOSS)** O BASE YEAR REVENUE
P ADJUSTMENTS
Q BUDGET YEAR REVENUE O P RECORDS XXXXX XXXXX XXXXX XXXXX XXXXX BUDGET XXXXX Q XXXXX XXXXX XXXXX

R	PROFIT (LOSS)
	FTE DATA

BASE YR HOURS WORKED/2080	RECORDS	3.6
BUDGET YR HOURS/2080	BUDGET	

XXXXX

XXXXX

PTE

INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR

6/30/2018

INSTITUTION NUMBER:

0011

BUDGET YEAR

1/0/1900

	VOLUME	BASE YEAR	BUDGET YEAR
	DATA	UNITS	UNITS
A	# of Phones	0	0

COL. 1

COL 2

COL. 3

COL 4

PATIENT TELEPHONES -8615

5610

	WAGES, SALARIES		TOTAL	EXPENSE
SOURCE	& FRINGE	OTHER	EXPENSES	REVENUE
	BENEFITS	EXPENSES	REVENUE	PER UNIT

BASE YEAR DATA

В	BASE YEAR EXPENSES		RECORDS	101.7	151.1	252.8	XXXXX	В
C	ALLOCATION FROM CAFETERI	A. PARKING, ETC.	SCH OAC	1.3	XXXXX	1.3	XXXXX	С
	ALLOCATION FROM GENERAL		1111	XXXXX	XXXXX	XXXXX	XXXXX	D
-111	COL 5 COST CENTER	COL 6 CODE	1111	XXXXX	XXXXX	XXXXX	XXXXX	111
D1						0.0	XXXXX	D1
D2						0,0	XXXXX	D2
D3						0.0	XXXXX	D3
D4						0.0	XXXXX	D4
D5						0.0	XXXXX	D5
D6						0.0	XXXXX	D6
D7						0.0	XXXXX	D7
D8						0,0	XXXXX	D8
D9						0,0	XXXXX	D9
D10						0.0	XXXXX	D10
D11						0.0	XXXXX	D11
D12						0.0	XXXXX	D12
E	CAPITAL FACILITIES ALLOWAN	ICE	SCH H3		0.0	0,0	XXXXX	E
F	DONATED SERVICES & COMMI	ODITIES	RECORDS	0.0	0.0	0.0	XXXXX	F
G	BASE YEAR ADJUSTED EXPEN	SES	B+C+D+E+F	103.0	151_1	254.1	#DIV/0!	G

BASE YEAR PROFIT (LOSS)

Н	BASE YEAR REVENUE	RECORDS	XXXXX	XXXXX	47.0	XXXXX	H
T	PROFIT (LOSS)	H-G	XXXXX	XXXXX	(207.1)	XXXXX	
J	AMOUNT TREATED AS FRINGE	RECORDS	XXXXX	XXXXX	0.0	XXXXX	J
к	AMOUNT TREATED AS OFC	12	XXXXX	XXXXX	(207.1)	XXXXX	K

BUDGET YEAR DATA

L INFLATION	HSCRC			XXXXX	L
M MISCELLANEOUS ADJUSTMENTS	BUDGET			XXXXX	M
N BUDGET YEAR EXPENSES	G+L+M	103.0	151_1	XXXXX	N

BUDGET YEAR PROFIT (LOSS)

O BASE YEAR REVENUE	RECORDS	XXXXX	XXXXX	XXXXX O
P ADJUSTMENTS	BUDGET	XXXXX	XXXXX	XXXXX P
Q BUDGET YEAR REVENUE	O+P	XXXXX	XXXXX	XXXXX Q
R PROFIT (LOSS)	Q-N	XXXXX	XXXXX	XXXXX R

FTE DATA

S	BASE YR HOURS WORKED/2080	RECORDS	2.3
T	BUDGET YR HOURS/2080	BUDGET	

S

E 7 CAF

BUDGET YEAR 1/0/1900 INSTITUTION NUMBER: 0011

Saint Agnes Hospital

	VOLUME	BASE YEAR	BUDGET YEAR
	DATA	UNITS	UNITS
A	Meals	0	0

INSTITUTION NAME:

COL. 1 COL, 2 COL 3 COL, 4

2,929.1

0.0

6/30/2018

B C D

D1 D2 D3 D4 D5 D6 D7

D8 D9 D10

D11 D12 E

0.0 0.0 0.0 0.0 0.0 2,929.1

BASE YEAR

CAFETERIA -8320 5320	SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES REVENUE	EXPENSE REVENUE PER UNIT
BASE YEAR DATA					

В	BASE YEAR EXPENSES		RECORDS	0.0	2,929.1	2,929.1	XXXXX
C	ALLOCATION FROM CAFETER	IA. PARKING, ETC.	SCH OAC	XXXXX	XXXXX	XXXXX	XXXXX
D	ALLOCATION FROM GENERAL	SERVICE CENTER	1111	XXXXX	XXXXX	XXXXX	XXXXX
Ш	COL. 5 COST CENTER	COL 6 CODE	1111	XXXXX	XXXXX	XXXXX	XXXXX
D1						0.0	XXXXX
D2						0.0	XXXXX
D3						0.0	XXXXX
D4						0.0	XXXXX
D5						0.0	XXXXX
D6						0.0	XXXXX
D7						0.0	XXXXX
D8						0.0	XXXXX
D9						0.0	XXXXX
D10						0.0	XXXXX
D11						0.0	XXXXX
D12						0.0	XXXXX
Ε	CAPITAL FACILITIES ALLOWA	NCE	SCH H3		0.0	0.0	XXXXX
F	DONATED SERVICES & COMM	IODITIES	RECORDS	0.0	0.0	0.0	XXXXX
~	DACE VEAD AD HISTED EVDEN	ICEC	BTCTDTETE	0.0	2 929 1	2 929 1	#DIV/O

SCH H3 RECORDS B+C+D+E+F

BASE YEAR PROFIT (LOSS)

E CAPITAL FACILITIES ALLOWANCE
F DONATED SERVICES & COMMODITIES
G BASE YEAR ADJUSTED EXPENSES

H	BASE YEAR REVENUE	RECORDS	XXXXX	XXXXX	1,720.2	XXXXX	H
	PROFIT (LOSS)	H-G	XXXXX	XXXXX	(1,208.9)	XXXXX	1
J	AMOUNT TREATED AS FRINGE	RECORDS	XXXXXX	XXXXX	(1,208.9)	XXXXX	J
K	AMOUNT TREATED AS OFC	II-J	XXXXX	XXXXX	0.0	XXXXX	K

BUDGET YEAR DATA

L INF	LATION	HSCRC			XXXXX	L
M MIS	SCELLANEOUS ADJUSTMENTS	BUDGET			XXXXX	М
N BU	DGET YEAR EXPENSES	G+L+M	0.0	2.929.1	XXXXX	I N

BUDGET YEAR PROFIT (LOSS)

O BASE YEAR REVENUE	RECORDS	XXXXX	XXXXX	XXXXX O
P ADJUSTMENTS	BUDGET	XXXXX	XXXXX	XXXXX P
Q BUDGET YEAR REVENUE	O+P	XXXXX	XXXXX	XXXXX Q
R PROFIT (LOSS)	Q-N	XXXXX	XXXXX	XXXXXX R

FTE DATA

S BASE YR HOURS WORKED/2080	RECORDS	0.0
T BUDGET YR HOURS/2080	BUDGET	

DEB E 8

 INSTITUTION NAME:
 Saint Agnes Hospital
 BASE YEAR
 6/30/2018

 INSTITUTION NUMBER:
 0011
 BUDGET YEAR
 1/0/1900

 VOLUME DATA
 BASE YEAR UNITS
 BUDGET YEAR UNITS

 A SQ. FEET
 0
 0

COL 1 COL 2 COL 3 COL 4

DAY CARE RECREATION AREAS

	WAGES, SALARIES		TOTAL	EXPENSE
SOURCE	& FRINGE	OTHER	EXPENSES	REVENUE
	BENEFITS	EXPENSES	REVENUE	PER UNIT

BASE YEAR DATA

В	BASE YEA	R EXPENSES		RECORDS	89.7	1.4	91.1	XXXXX	B
		ON FROM CAFETERIA	PARKING, ETC.	SCH OAC	XXXXX	XXXXX	XXXXX	XXXXX	С
D	ALLOCATI	ON FROM GENERAL S	ERVICE CENTER	IIII	XXXXX	XXXXX	XXXXX	XXXXX	D
111	COL. 5	COST CENTER	COL 6 CODE	1111	XXXXX	XXXXX	XXXXX	XXXXX	111
D1	1				XXXXXXX		0.0	XXXXX	D1
D2							0.0	XXXXX	D2
D3							0.0	XXXXX	D3
D4							0.0	XXXXX	D4
D5							0,0	XXXXX	D5
D6							0.0	XXXXX	D6
D7							0.0	XXXXX	D7
D8							0.0	XXXXX	D8
D9							0.0	XXXXX	D9
D10							0.0	XXXXX	D10
D11							0.0	XXXXX	D11
D12							0.0	XXXXX	D12
E	CAPITAL F	ACILITIES ALLOWAND	E	SCH H3		0.0	0.0	XXXXX	E
F	DONATED	SERVICES & COMMO	DITIES	RECORDS	0.0	0.0	0.0	XXXXX	F
G	BASE YEA	R ADJUSTED EXPENS	ES	B+C+D+E+F	89.7	1.4	91.1	#DIV/01	G

BASE YEAR PROFIT (LOSS)

Н	BASE YEAR REVENUE	RECORDS	XXXXX	XXXXX	17.8	XXXXX	TH
ī	PROFIT (LOSS)	lH-G	XXXXX	XXXXX	(73.3)	XXXXX	11
J	AMOUNT TREATED AS FRINGE	RECORDS	XXXXX	XXXXX	(73.3)	XXXXX	J
K	AMOUNT TREATED AS OFC	11	XXXXX	XXXXX	0.0	XXXXX	K

BUDGET YEAR DATA

L	INFLATION	HSCRC			XXXXX	L
M	MISCELLANEOUS ADJUSTMENTS	BUDGET			XXXXX	М
N	BUDGET YEAR EXPENSES	G+L+M	89.7	1.4	XXXXX	N

BUDGET YEAR PROFIT (LOSS)

0	BASE YEAR REVENUE	RECORDS	XXXXX	XXXXX	XXXXX	0
Р	ADJUSTMENTS	BUDGET	XXXXX	xxxxx	XXXXX	Р
Q	BUDGET YEAR REVENUE	O+P	XXXXX	XXXXX	XXXXX	Q
R	PROFIT (LOSS)	Q-N	XXXXX	XXXXX	XXXXX	R

FTE DATA

S BASE YR HOURS WORKED/2080	RECORDS	1.4
T BUDGET YR HOURS/2080	BUDGET	

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING, ETC.)

OADP

INSTITUTION NAME: INSTITUTION NUMBER: BASE YEAR Saint Agnes Hospital

Allocation of Cafeteria/Parking Expense

	Allocator of Galerenan String Expenses	COL						
	LOSS PER FTE	SOURCE	TOTAL					
A	GAIN (LOSS) TO BE ALLOC, AS FRINGE	SCH. E2,E7,E8,E9	1,282.2					
В	NUMBER OF FTE'S	RECORDS	2,199					
B1	LOSS PER FTE	A/B	0.58					

	Allocation of Data Processing		COL 2	COL 3	COL 4
	•		WAGES, SALARIES	OTHER	TOTAL
	BASE YEAR DATA	SOURCE	& BENEFITS	EXPENSES	EXPENSES
G1	FISCAL YEAR EXPENSES		380.40	16,076,70	16,457.10
2	DONATED SERVICES & COMMODITIES		0.00	0.00	0,00
3	FISCAL YEAR ADJUSTED EXPENSES		380.40	16,076,70	16,457.10

	DISTRIBUTIONS			CAFETERIA, PARKING I	ETC ALLOC	DATA PROCE	SSING ALLOC				
				COL. 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	COL. 8
						Allocated		WAGES, SALARIES	Other	DP	Col. 2 + Col. 7
		SCHED	CODE	FTE	B1*D1	Amount	Basis	& BENEFITS	Expenses	ALLOCATION	Total Alloc Expense
D1	DIETARY SERVICES	C 1	DTY	0.0	0.0	0.00	0.00%	0.00	0.00	0.00	0.00
2	LAUNDRY & LINEN	C-2	LL	16.2	9,4	0.00	0.00%	0.00	0.00	0.00	9.43
3	SOCIAL SERVICES	C 3	SSS	9.7	5,7	0.00	0.00%	0.00	0_00	0.00	5.68
4	PURCHASING & STORES	C 4	PUR	3.6	2.1	0.00	14.80%	56.30	2,379.35	2,435.65	2,437.72
5	PLANT OPERATIONS	C 5	POP	33.3	19.4	0.00	0.00%	0.00	0.00	0.00	19 41
6	HOUSEKEEPING	C 6	HKP	0.0	0.0	0.00	0.00%	0.00	0.00	0.00	0.00
7	CENTRAL SERVICES & SUPPLY	C7	CSS	42.1	24,5	0.00	0.00%	0.00	0.00	0.00	24.53
8	PHARMACY	C 8	PHM	42.4	24.7	0.00	0.00%	0.00	0.00	0.00	24.70
9	GENERAL ACCOUNTING	C 9	FIS	5.4	3.2	0.00	6.10%	23.20	980.68	1,003.88	1,007.06
10	PATIENT ACCOUNTS	C10	PAC	79.5	46.4	0.00	65.80%	250,30	10,578.47	10,828.77	10,875.15
11	HOSPITAL ADMINISTRATION	C11	MGT	57.2	33.4	0.00	0.00%	0.00	0.00	0.00	33.36
12	MEDICAL RECORDS	C12	MRD	44.4	25.9	0.00	6.80%	25.87	1,093.22	1,119.08	
13	MEDICAL STAFF ADM	C13	MSA	9.0	5.2	0.00	0.00%	0.00	0.00	0.00	5.24
14	NURSING ADMIN	G14	NAD	36.0	21.0	0.00	0.00%	0,00	0,00	0_00	
15	ORGAN ACQUISITION OVERHEAD	C15	OAO	0.0	0.0	0.00	0.00%	0.00	0.00	0.00	0.00
16	MED SURGICAL ACUTE	D 1	MSG	260.4	151.8	0.00	0.00%	0.00	0.00	0.00	151.82
17	PEDIATRIC ACUTE	D2	PED	0.0	0.0	0.00	0.00%	0.00	0.00	0.00	
18	PSYCHIATRIC ACUTE	D 3	PSY	0.0	۵۵	0.00	0.00%	0.00	0.00	0.00	0.00
19	OBSTETRICS ACUTE	D 4	OBS	20.3	11.8	0.00	0.00%	0.00	0.00	0.00	
20	DEFINITIVE OBSERVATION	0.5	DEF	0.0	0.0	0.00	0.00%	0.00	0.00	0.00	0.00
21	MED SURG INTENSIVE CARE	D 6	MIS	47.2	27.5	0.00	0.00%	0.00	0.00	0.00	27.54
22	CORONARY CARE	D7	CCU	0.0	0.0	0.00	0.00%	0.00	0.00	0.00	0.00
23	PEDIATRIC INTENSIVE CARE	D8	PIC	0.0	0.0	0.00	0.00%	0.00	0.00	0.00	0.00
24	NEO-NATAL INTENSIVE CARE	D 9	NEO	23.8	13.9	0.00	0.00%	0.00	0.00	0,00	13.88
25	BURN CARE	D10	BUR	0.0	0,0	0.00	0.00%	0.00	0.00		
26	PSYCHIATRIC INTENSIVE CARE	D11	PSI	0.0	0.0	0.00	0.00%	0.00	0.00	0.00	
27	SHOCK TRAUMA	D12	TRM	0.0	0.0	0.00	0.00%	0.00	0.00		
28	ONCOLOGY	D13	ONC	0.0	0.0	0.00	0.00%	0.00	0.00		
29	NEWBORN NURSERY	D14	NUR	11.4	6.7	0.00	0.00%	0.00	0.00		
30	PREMATURE NURSERY	D15	PRE	0.0	0.0	0.00	0.00%	0.00	0.00		0.00
31	INTERMEDIATE CARE	D17	ICC	0.00	0.0	0.00	0.00%	0.00	0.00	0.00	0.00

INSTITUTION NAME: INSTITUTION NUMBER: BASE YEAR Saint Agnes Hospital 11.00 43,281.00

0011

	DISTRIBUTIONS			CAFETERIA, PARKING E	TC ALLOC	DATA PROCES	SING ALLOC				
				COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	COL 8
						Allocated		WAGES, SALARIES	Other	DP	Col. 2 + Col. 7
		SCHED	CODE	FTE	B1*D1	Amount	Basis	& BENEFITS	Expenses	ALLOCATION	Total Alloc Expense
32	EMERGENCY SERVICES	D18	EMG	130.66	76.19	0.00	0.00%	0.00	0.00	0.00	76.19
33	CLINIC SERVICES	D19	CL	37_41	21.81	0.00	0.00%	0.00	0.00	0.00	21.81
34	PSYCH DAY & NIGHT CARE	D20	PDC	0.00	0.00	0.00	0.00%	0.00	0.00	0.00	0.00
35	SAME DAY SURGERY	D22	SDS	15.36	8.96	0.00	0.00%	0.00	0.00	0.00	8.96
36	LABOR & DELIVERY	D23	DEL	43.03	25.09	0.00	0.00%	0.00	0.00	0.00	25 09
37	OPERATING ROOM	D24	OR	94.89	55.33	0.00	0.00%	0.00	0.00	0.00	55.33
38	OPERATING ROOM CLINIC	D24-A	ORC	3.66	2.13	0.00	0.00%	0.00	0.00	0.00	2.13
39	ANESTHESIOLOGY	D25	ANS	4.87	2.84	0.00	0.00%	0.00	0.00	0.00	2.84
40	LABORATORY SERVICES	D28	LAB	130.42	76.05	0.00	6.50%	24.73	1,044.99	1,069.71	1,145.76
41	ELECTROCARDIOGRAPHY	D30	EKG	15.64	9.12	0.00	0.00%	0.00	0.00	0.00	9 12
42	INTERVENTIONAL RADIOLOGY/CARDIOVASO		IRC	30.84	17.98	0.00	0.00%	0.00	0.00	0.00	17.98
43	RADIOLOGY - DIAGNOSTIC	D32	RAD	47.80	27.87	0.00	0.00%	0.00	0.00	0.00	27.87
44	CT SCANNER	D33	CAT	15.04	8.77	0.00	0.00%	0.00	0.00	0.00	8.77
45	RADIOLOGY - THERAPEUTIC	D34	RAT	15.87	9.25	0.00	0.00%	0.00	0.00	0.00	9.3
46	NUCLEAR MEDICINE	D35	NUC	8.21	4.79	0.00	0.00%	0.00	0.00	0.00	4.79
47	RESPIRATORY THERAPY	D36	RES	46.47	27.09	0.00	0.00%	0.00	0.00	0.00	27.09
48	PULMONARY FUNCTION TESTING	D37	PUL	2.33	1.36	0.00	0.00%	0.00	0.00	0.00	1.36
49	ELECTROENCEPHALOGRAPHY	D38	EEG	2.00	1,17	0.00	0.00%	0.00	0.00	0.00	1.17
		D39	PTH	23.21	13.54	0.00	0.00%	0.00	0.00	0.00	13.54
50	PHYSICAL THERAPY				4.69	0.00	0.00	0.00	0.00	0.00	4.69
51	OCCUPATIONAL THERAPY	D40	OTH	8.04		0.00	0.00	0.00	0.00	0.00	1.37
52	SPEECH LANGUAGE PATHOLOGY	D41	STH	2.35	1.37	0.00	0.00	0.00	0.00	0.00	0.00
53	RECREATIONAL THERAPY	D42	REC	0.00							0.59
54	AUDIOLOGY	D43	AUD	1.01	0,59	0.00	0.00	0.00	0.00	0.00	
55	OTHER PHYSICAL MEDICINE	D44	OPM	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
56	RENAL DIALYSIS	D45	RDL	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
57	ORGAN ACQUISITION	D46	OA	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
58	AMBULATORY SURGERY	D47	AOR	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
59	LEUKOPHERESIS	D48	LEU	0.00	0.00	0.00	0.00	0.00	0.00		0.00
60	HYPERBARIC CHAMBER	D49	HYP	0.00	0.00	0.00	0.00	0.00	0.00		0.00
61	FREE STANDING EMERGENCY SVCS	D50	FSE	0.00	0.00	0.00	0.00	0.00	0.00		0.00
62	MRI SCANNER	D51	MRI	5.08	2.96	0.00	0.00	0.00	0.00		2.96
63	LITHOTRIPSY	D53	LIT	0.00	0.00	0.00	0.00	0.00	0.00		0.00
64	REHABILITATION	D54	RHB	0.00	0.00	0.00	0.00	0.00	0.00		0.00
65	OBSERVATION	D55	OBV	58.78	34.28	0.00	0.00	0.00	0.00		34.28
66	AMB SERVICES - REBUNDLED	D56	AMR	0.00	0.00	0.00	0.00	0.00	0.00		0.00
67	TRANSURETHAL MICROWAVE THER.	D57	TMT	0.00	0.00	0.00	0.00	0.00	0.00		0.00
68	ONCOLOGY CLINIC	D58	OCL	0.00	0.00	0.00	0.00	0.00	0.00		0.00
69	TRANSURETHAL NEEDLE ABLATION	D59	TNA	0.00	0.00	0.00	0.00	0.00	0.00		0.00
70	PSYCH ADULT	D70	PAD	0.00	0.00	0.00	0.00	0.00	0.00		0.00
71	PSYCH CHILD/ADOLESCENT	D71	PCD	0.00	0.00	0.00	0.00	0,00	0.00		0.00
72	PSYCH GERIATRIC	D73	PSG	0.00	0.00	0.00	0.00	0.00	0.00		0.00
73	INDIVIDUAL THERAPIES	D74	ITH	0.00	0.00	0.00	0.00	0.00	0.00		0.00
74	GROUP THERAPIES	D75	GTH	0.00	0.00	0.00	0.00	0.00	0.00		0.00
75	FAMILY THERAPIES	D76	FTH	0.00	0.00	0.00	0.00	0,00	0.00		0.00
76	PSYCH TESTING	D77	PST	0.00	0.00	0.00	0.00	0,00	0.00	0.00	0.00
77	EDUCATION	D78	PSE	0.00	0.00	0.00	0.00	0,00	0.00		0.00
78	OTHER THERAPIES	D79	OPT	0.00	0.00	0.00	0.00	0.00	0.00		0.00
79	ELECTROCONVULSIVE THERAPY	D80	ETH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING, ETC.)

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INSTITUTION NAME: INSTITUTION NUMBER: BASE YEAR Saint Agnes Hospital 11.00 43,281.00

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DISTRIBUTIONS			CAFETERIA, PARKING E		DATA PROCES COL 3		COL 5	COL 6	COL 7	COL 8
			COL 1	COL 2		COL 4	WAGES, SALARIES	Other	DP I	Col. 2 + Col. 7
	SCHED	CODE	FTE	B1*D1	Allocated Amount	Basis	& BENEFITS	Expenses	ALLOCATION	Total Alloc Expense
80 ACTIVITY THERAPIES	D81	ATH	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
81 AMBULANCE SERVICES	E1	AMB	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
82 DR. PRIVATE OFFICE RENTAL	E3	DPO	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
83 OFFICE & OTHER RENTAL	E4	OOR	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
84 RETAIL OPERATIONS	E5	REO	3.55	2.07	0.00	0.00	0.00	0.00	0.00	2.07
85 PATIENT TELEPHONES	E6	PTE	2.30	1.34	0.00	0.00	0.00	0.00	0.00	1.34
86 RESEARCH	F1	REG	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
87 NURSING EDUCATION	F2	RNS	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
88 OTHER HEALTH PROF. EDUCATION	F3	OHE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
89 COMMUNITY HEALTH EDUCATION	F4	CHE	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
90 MEDICAL SURGICAL ACUTE	P2A	MSG	0.00	0.00	0.00	0.00	0,00		0.00	0.00
91 PEDIATRIC ACUTE	P2A	PED	0.00	0.00					0.00	0.00
92 PSYCHIATRIC ACUTE	P2A	PSY	0.00	0.00					0.00	0.00
93 OBSTETRICS ACUTE	P2A	OBS	0.00	0.00					0.00	0.00
94 DEFINITIVE OBSERVATION	P2A	DEF	0.00	0.00					0.00	0.00
95 M/S INTENSIVE CARE	P2A	MIS	0.00	0.00					0.00	0.00
96 CORONARY CARE	P2A	CCU	0.00	0.00					0.00	0.00
97 PEDIATRIC INTENSIVE CARE	P2B	PIC	0.00	0.00					0.00	0.00
98 NEONATAL INTENSIVE CARE	P2B	NEO	0.00	0.00					0.00	0.00
99 BURN CARE	P2B	BUR	0.00	0.00					0.00	0.00
100 PSYCHIATRIC INTENSIVE CARE	P2B	PSI	0.00	0.00					0.00	0.00
101 SHOCK TRAUMA	P2B	TRM	0.00	0.00					0.00	0.00
102 ONCOLOGY	P2B	ONC	0.00	0.00					0.00	0.00
103 NEWBORN NURSERY	P2B	NUR	0.00	0.00					0.00	0.00
104 PREMATURE NURSERY	P2C	PRE	0.00	0.00					0.00	0.00
105 SAME DAY SURGERY	P2C	SDS	0.00	0.00					0.00	0.00
106 INTERMEDIATE CARE	P2C	ICC	0.00	0.00					0.00	0.00
107 EMERGENCY SERVICES	P2C	EMG	0.00	0.00					0.00	0.00
108 CLINIC SERVICES	P2C	CL	0.00	0.00					0.00	0.00
109 PSYCH DAY & NIGHT CARE	P2C	PDC	0.00	0.00					0.00	0.00
110 MRI	P2D	MRI	0.00	0.00					0.00	0.00
111 LABOR & DELIVERY	P2D	DEL	0.00	0.00					0.00	0.00
112 OPERATING ROOM	P2D	OR	0.00	0.00					0.00	0.00
113 OPERATING ROOM CLINIC	P2D	ORC	0.00	0.00					0.00	0.00
114 ANESTHESIOLOGY	P2D	ANS	0.00	0.00					0.00	0.00
115 LABORATORY SERVICES	P2D	LAB	0.00	0.00					0.00	0.00
116 ELECTROCARDIOGRAPHY	P2D	EKG	0.00	0.00					0.00	0.00
117 INTERVENTIONAL RADIOLOGY/CARDIOVAS		IRC	0.00	0.00					0.00	0.00
118 RADIOLOGY - DIAGNOSTIC	P2E	RAD	0.00	0.00					0.00	0.00
119 CT SCANNER	P2E	CAT	0.00	0.00					0.00	0.0
120 RADIOLOGY - THERAPEUTIC	P2E	RAT	0.00	0.00					0.00	0.00
121 NUCLEAR MEDICINE	P2C	NUC	0.00	0.00					0.00	0.0
122 RESPIRATORY THERAPY	P2E	RES	0.00	0.00					0.00	0.00
123 PULMONARY FUNCTION TESTING	P2E	PUL	0.00	0.00					0.00	0.00
124 ELECTROENCEPHALOGRAPHY	P2F	EEG	0.00	0.00					0.00	0.0
125 PHYSICAL THERAPY	P2F	PTH	0.00	0.00					0.00	0.00
126 OCCUPATIONAL THERAPY	P2F	OTH	0.00	0.00					0.00	0.0

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING, ETC.)

INSTITUTION NAME: INSTITUTION NUMBER: BASE YEAR

Saint Agnes Hospital 11.00

43,281.00

DISTRIBUTIONS			CAFETERIA, PARKING E	TC ALLOC	DATA PROCE	SSING ALLOC	;			
			COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	COL 8
					Allocated		WAGES, SALARIES	Other	DP	Col. 2 + Col. 7
	SCHED	CODE	FTE	B1*D1	Amount	Basis	& BENEFITS	Expenses	ALLOCATION	Total Alloc Expense
127 SPEECH LANGUAGE PATHOLOGY	P2F	STH	0.00	0.00			2011001101000000	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	0.00	0.00
128 OBSERVATION	P2F	OBV	0.00	0.00					0.00	0.00
129 AUDIOLOGY	P2F	AUD	0.00	0.00					0.00	0.00
130 OTHER PHYSICAL MEDICINE	P2F	OPM	0.00	0.00					0.00	0.00
131 RENAL DIALYSIS	P2G	RDL	0.00	0.00					0.00	0.00
132 ORGAN ACQUISITION	P2G	OA	0.00	0.00					0.00	0.00
133 AMBULATORY SURGERY	P2G	AOR	0.00	0.00					0.00	0,00
134 LEUKOPHERESIS	P2G	LEU	0.00	0.00					0.00	0.00
135 HYPERBARIC CHAMBER	P2G	HYP	0.00	0.00					0.00	0.00
136 FREE STANDING EMERGENCY SVCS	P2G	FSE	0.00	0.00					0.00	0.00
137 LITHOTRIPSY	P2G	LIT	0.00	0.00					0.00	0.00
138 REHABILITATION	P2H	RHB	0.00	0.00					0.00	0.00
139 TRANSURETHAL MICROWAVE THER	P2H	TMT	0.00	0.00					0.00	0.00
140 ONCOLOGY CLINIC	P2H	OCL	0.00	0.00					0.00	0.00
141 TRANSURETHAL NEEDLE ABLATION	P2H	TNA	0.00	0.00					0.00	0.00
142 PSYCH ADULT	P2H	PAD	0.00	0.00					0.00	0.00
143 PSYCH CHILD/ADOLESCENT	P2H	PCD	0.00	0.00					0.00	0.00
144 PSYCH GERIATRIC	P2H	PSG	0.00	0.00					0.00	0.00
145 INDIVIDUAL THERAPIES	P2I	ITH	0.00	0.00					0.00	0.00
146 GROUP THERAPIES	P2I	GTH	0.00	0.00						0.00
147 PSYCH TESTING	P2I	PST	0.00	0.00				i	0.00	
148 EDUCATION	P2I	PSE	0.00	0.00						0.00
149 OTHER THERAPIES	P2I			0.00	-				0.00	0.00
150 ACTIVITY THERAPY	P2I	OPT ATH	0.00						0.00	0.00
The state of the s			0.00	0.00					0.00	0.00
151 MED/SURG ACUTE	P3A	MSG	0.00	0.00					0.00	0.00
152 PEDIATRIC ACUTE	P3A	PED	0.00	0.00					0.00	0.00
153 PSYCHIATRIC ACUTE	P3A	PSY	0.00	0.00					0,00	0.00
154 OBSTETRICS ACUTE	P3A	OBS	0.00	0.00					0.00	0.00
155 DEFINITIVE OBSERVATION	P3A	DEF	0.00	0.00					0.00	0.00
156 MED/SURG INTENSIVE CARE	P3A	MIS	0.00	0.00					0.00	0.00
157 CORONARY CARE	P3A	ccu	0.00	0.00					0.00	0.00
158 PEDIATRIC INTENSIVE CARE	P38	PIC	0.00	0.00					0.00	0.00
159 NEONATAL INTENSIVE CARE	P3B	NEO	0.00	0.00					0.00	0.00
160 BURN CARE	P3B	BUR	0.00	0.00					0.00	0.00
161 PSYCHIATRIC INTENSIVE CARE	P3B	PSI	0.00	0.00					0.00	0.00
162 SHOCK TRAUMA	P3B	TRM	0.00	0.00					0.00	0.00
163 ONCOLOGY	P3B	ONC	0.00	0.00					0.00	0.00
164 NEWBORN NURSERY	P3B	NUR	0.00	0.00					0.00	0.00
165 PREMATURE NURSERY	P3C	PRE	0.00	0.00					0.00	0.00
166 SAME DAY SURGERY	P3C	SDS	0.00	0.00					0.00	0.00
167 INTERMEDIATE CARE	P3C	ICC	0.00	0.00					0.00	0.00
168 EMERGENCY SERVICES	P3C	EMG	0.00	0.00					0.00	0.00
169 CLINIC SERVICES	P3C	CL	0.00	0.00					0.00	0.00
170 PSYCH DAY & NIGHT CARE	P3C	PDC	0.00	0.00					0.00	0.00
171 MRI	P3D	MRI	0.00	0.00					0.00	0.00
172 LABOR & DELIVERY	P3D	DEL	0.00	0.00					0.00	0.00
173 OPERATING ROOM	P3D	OR	0.00	0.00					0.00	0.00
174 OPERATING ROOM CLINIC	P3D	ORC	0.00	0.00					0.00	0.00

0.00

1.08

0.00

INSTITUTION NAME: INSTITUTION NUMBER: BASE YEAR Saint Agnes Hospital

11.00 43.281.00

P4C

P4C

CL

PDC

222 CLINIC SERVICES

223 PSYCH DAY & NIGHT CARE

CAFETERIA, PARKING ETC ALLOC. DATA PROCESSING ALLOC DISTRIBUTIONS COL 1 COL 3 COL 6 COL. 7 COL. 8 WAGES, SALARIES Allocated Other DP Col. 2 + Col. 7 SCHED CODE FTE B1*D1 Amount & BENEFITS Expenses ALLOCATION Total Alloc Expense Basis 175 ANESTHESIOLOGY P3D ANS 0.00 0,00 0.00 0.00 176 LABORATORY SERVICES P3D LAB 0.00 0.00 0.00 0.00 177 INDIVIDUAL THERAPIES P3D ITH 0.00 0.00 0.00 0.00 178 ELECTROCARDIOGRAPHY P3D EKG 0.00 0.00 0.00 0.00 179 INTERVENTIONAL RADIOLOGY/CARDIOVASC P3E IRC 0.00 0.00 0.00 0.00 180 RADIOLOGY - DIAGNOSTIC P3E RAD 0.00 0,00 0.00 0.00 0.00 P3E 0.00 0.00 181 CT SCANNER CAT 0.00 182 RADIOLOGY THERAPEUTIC P3E RAT 0.00 0.00 0.00 0.00 P3E 183 NUCLEAR MEDICINE NUC 0.00 0.00 0.00 0.00 184 RESPIRATORY THERAPY P3E RES 0.00 0.00 0.00 0.00 185 PULMONARY FUNCTION TESTING P3E PUL 0.00 0.00 0.00 0.00 P3F 0.00 0.00 186 ELECTROENCEPHALOGRAPHY EEG 0.00 0.00 187 PHYSICAL THERAPY P3F PTH 0.00 0.00 0.00 0.00 188 OCCUPATIONAL THERAPY P3F OTH 0.00 0.00 0.00 0.00 189 SPEECH LANGUAGE PATHOLOGY P3F STH 0.00 0.00 0.00 0.00 190 OBSERVATION P3F OBV 0.00 0,00 0.00 0.00 191 AUDIOLOGY P3F 0.00 0.00 0.00 0.00 AUD OTHER PHYSICAL MEDICINE P3F OPM 0.00 0.00 0.00 0.00 P3G 193 RENAL DIALYSIS RDL 0.00 0.00 0.00 0.00 194 ORGAN ACQUISITION P3G OA 0.00 0.00 0.00 0.00 195 AMBULATORY SURGERY P3G AOR 0.00 0.00 0.00 0.00 0.00 196 LEUKOPHERESIS P3G LEU 0.00 0.00 0.00 197 HYPERBARIC CHAMBER P3G HYP 0.00 0.00 0.00 0.00 198 FREE STANDING EMERGENCY SVCS P3G FSE 0.00 0.00 0.00 0.00 P3G 0.00 199 LITHOTRIPSY LIT 0.00 0.00 0.00 200 REHABILITATION РЗН RHB 0.00 0.00 0.00 0.00 201 TRANSURETHAL MICROWAVE THER P3H TMT 0.00 0.00 0.00 0.00 202 ONCOLOGY CLINIC РЗН OCL 0.00 0.00 0.00 0.00 РЗН 0.00 203 TRANSURETHAL NEEDLE ABLATION 0.00 0.00 0.00 TNA 204 MEDICAL SURG ACUTE P4A MSG 22.62 22.62 38.80 0.00 205 PEDIATRIC ACUTE P4A PED 0.00 0.00 0.00 0.00 206 PSYCHIATRIC ACUTE P4A PSY 0.00 0.00 0.00 0.00 207 OBSTETRICS ACUTE P4A OBS 0.00 0.00 0.00 0.00 208 DEFINITIVE OBSERVATION P4A 0.00 0.00 0.00 0.00 DEF 209 MED/SURG INTENSIVE CARE P4A MIS 4.85 4.85 8.31 0.00 210 CORONARY CARE P4A CCU 0.00 0,00 0.00 0.00 211 PEDIATRIC INTENSIVE CARE P4A PIC 0.00 0.00 0.00 0.00 P4A 212 NEO NATAL INTENSIVE CARE NEO 2.98 1.74 0.00 1.74 213 BURN CARE P4A BUR 0.00 0.00 0.00 0.00 214 PSYCHIATRIC INTENSIVE CARE P4A PSI 0.00 0.00 0.00 0.00 215 SHOCK TRAUMA P4A TRM 0.00 0.00 0.00 0.00 P4A ONC 216 ONCOLOGY 0.00 0.00 0.00 0.00 P4A 217 NEWBORN NURSERY NUR 1.70 0.99 0.00 0.99 218 PREMATURE NURSERY P4A PRE 0.00 0.00 0.00 0.00 219 SAME DAY SURGERY P4A SDS 0.00 0.00 0.00 0.00 0.00 220 INTERMEDIATE CARE P4A ICC 0.00 0.00 0.00 221 EMERGENCY SERVICES P4C EMG 4.71 2.75 0.00 2.75

1.85

0.00

1.08

0.00

INSTITUTION NAME: INSTITUTION NUMBER: BASE YEAR Saint Agnes Hospital 11 00

43,281.00

	- 0		COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL. 7	COL. 8
	001150	2005		84484	Allocated	.	WAGES, SALARIES	Other	DP	Col. 2 + Col. 7
204 James	SCHED P4D	CODE MRI	FTE 0.00	B1*D1 0.00	Amount	Basis	& BENEFITS	Expenses	ALLOCATION 0.00	Total Alloc Expense
224 MRI	P4D	DEL	0.00	0.00		_			0.00	0.00
225 LABOR & DELIVERY	P4D	OR	9.35	5.45					0.00	5.45
226 OPERATING ROOM 227 OPERATING ROOM CLINIC	P4D	ORC	0.01	0.00					0.00	0.00
	P4D			0.00					0.00	0.7
228 ANESTHESIOLOGY		ANS	1.24	2.47					0.00	2.4
229 LABORATORY SERVICES	P4D P4D	LAB	4.24 1.70	0.99					0.00	0.99
230 ELECTROCARDIOGRAPHY		EKG							0.00	0.3
231 INTERVENTIONAL RADIOLOGY/CARDIOVAS		IRC	0.60	0.35						
232 RADIOLOGY - DIAGNOSTIC	P4E	RAD	0.00	0.00					0.00	0.00
233 CT SCANNER	P4E	CAT	0.00	0.00					0.00	0.00
234 RADIOLOGY - THERAPEUTIC	P4E	RAT	0.00	0.00					0.00	0.00
235 NUCLEAR MEDICINE	P4E	NUC	0.30	0.17					0.00	0.17
236 RESPIRATORY THERAPY	P4E	RES	0.00	0.00					0.00	0.00
237 PULMONARY FUNCTION TESTING	P4E	PUL	2.05	1.20					0.00	1,20
238 ELECTROENCEPHALOGRAPHY	P4F	EEG	1.14	0.67					0.00	0.67
239 PHYSICAL THERAPY	P4F	PTH	0.00	0.00					0.00	0.00
240 OCCUPATIONAL THERAPY	P4F	OTH	0.00	0,00					0.00	0,00
241 SPEECH LANGUAGE PATHOLOGY	P4F	STH	0.00	0.00					0.00	0.0
242 OBSERVATION	P4F	OBV	0.00	0.00					0.00	0.00
243 AUDIOLOGY	P4F	AUD	0.00	0.00					0.00	0.00
244 OTHER PHYSICAL MEDICINE	P4F	OPM	0.00	0.00					0.00	0.00
245 RENAL DIALYSIS	P4G	RDL	0.74	0.43					0.00	0.43
246 ORGAN ACQUISITION	P4G	OA	0.00	0.00					0.00	0.00
247 AMBULATORY SURGERY	P4G	AOR	0.00	0.00					0.00	0.00
248 LEUKOPHERESIS	P4G	LEU	0.00	0.00					0.00	0.0
249 HYPERBARIC CHAMBER	P4G	HYP	0.00	0.00					0.00	0.0
250 FREE STANDING EMERGENCY	P4G	FSE	0.00	0.00					0.00	0.0
251 LITHOTRIPSY	P4G	LIT	0.00	0.00					0.00	0.0
252 REHABILITATION	P4H	RHB	0.00	0.00					0.00	0.0
253 TRANSURETHAL MICROWAVE THER	P4H	TMT	0.00	0.00					0.00	0.0
254 ONCOLOGY CLINIC	P4H	OCL	0.00	0.00					0.00	0.0
255 TRANSURETHAL NEEDLE ABLATION	P4H	TNA	0.00	0.00					0.00	0.0
256 PSYCH ADULT	P4H	PAD	0.00	0.00					0.00	0.0
257 PSYCH CHILD/ADOLESCENT	P4H	PCD	0.00	0.00					0.00	0.0
258 PSYCH GERIATRIC	P4H	PSG	0.00	0.00					0.00	0.0
259 INDIVIDUAL THERAPIES	P41	ITH	0.00	0.00					0.00	0.0
260 GROUP THERAPIES	P41	GTH	0.00	0.00		-			0.00	0.0
261 PSYCH TESTING	P4I	PST	0.00	0.00					0.00	0.00
262 EDUCATION	P41	PSE	0.00	0.00					0.00	0.0
263 OTHER THERAPIES	P4L	OPT	0.00	0.00					0.00	0.0
264 ACTIVITY THERAPIES	P4I	ATH	0.00	0.00					0.00	0.0
265 MEDICAL SURG ACUTE	P5A	MSG	0.00	0.00					0.00	0.0
266 PEDIATRICS	P5A	PÉD	0.00	0.00					0.00	0.0
267 PSYCHIATRIC	P5A	PSY	0.00	0.00					0.00	0.0
268 OBSTETRICS	P5A	OBS	0.00	0.00					0.00	0.0
269 DEFINITIVE OBSERVATION	P5A	DEF	0.00	0.00					0.00	0.0
270 M/S INTENSIVE CARE	P5A	MIS	0.00	0.00					0.00	0.0
271 CORONARY CARE	P5A	CCU	0.00	0.00					0.00	0.0

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING, ETC.)

INSTITUTION NAME: INSTITUTION NUMBER: BASE YEAR Saint Agnes Hospital 11 00

43,281,00

DISTRIBUTIONS			CAFETERIA, PARKING	ETC ALLOC	DATA BBOCE	SSING ALLO				
DISTRIBUTIONS			COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	COL 8
			T COL 1	COL 2	Allocated	COL 4	WAGES, SALARIES	Other	COL 7	Col. 2 + Col. 7
	SCHED	CODE	FTE	B1*D1	Amount	Basis	& BENEFITS	Expenses	ALLOCATION	Total Alloc Expense
272 PEDIATRIC INTENSIVE CARE	P5B	PIC	0.00	0.00	Antouri	Dasis	& BENEFII 3	Expenses	0.00	0.00
273 NEO NATAL INTENSIVE CARE	P5B	NEO	0.00	0.00					0.00	0.00
274 BURN CARE	P5B	BUR	0.00	0.00					0.00	0.00
275 PSYCHIATRIC INTENSIVE CARE	P5B	PSI	0.00	0.00					0.00	0.00
276 SHOCK TRAUMA	P5B	TRM	0.00	0.00					0.00	0.00
277 ONCOLOGY	P5B	ONC	0.00	0.00			l		0.00	0.00
278 NEW BORN NURSERY	P5B	NUR	0.00	0.00					0.00	0.00
279 PREMATURE NURSERY	P5C	PRE	0.00	0.00					0.00	0.00
280 SAME DAY SURGERY	P5C	SDS	0.00	0.00					0.00	0.00
281 INTERMEDIATE CARE	P5C	ICC	0.00	0.00					0.00	0.00
282 EMERGENCY SERVICES	P5C	EMG	0.00	0.00						
283 CLINIC SERVICES	P5C	CL	0.00	0.00					0.00	0.00
284 PSYCH DAY/NIGHT CARE	P5C	PDC	0.00	0.00			-		0.00	0.00
285 MRI SCANNER	P5D	MRI	0.00	0.00					0.00	0.00
286 LABOR & DELIVERY	P5D	DEL							0.00	0.00
The state of the s			0.00	0,00			-		0.00	0.00
The State of the S	P5D	OR	0.00	0.00					0.00	0.00
288 OPERATING ROOM CLINIC	P5D	ORC	0.00	0,00					0.00	0.00
289 ANESTHESIOLOGY	P5D	ANS	0.00	0.00					0.00	0.00
290 LABORATORY SERVICES	P5D	LAB	0.00	0.00					0.00	0.00
291 ELECTROCARDIOGRAPHY 292 INTERVENTIONAL RADIOLOGY/CARDIOVASO	P5D	EKG	0.00	0.00					0.00	0.00
		IRC	0.00	0,00					0.00	0.00
293 RADIOLOGY - DIAGNOSTIC	P5E	RAD	0.00	0.00					0.00	0.00
294 CT SCANNER	P5E	CAT	0,00	0.00					0.00	0.00
295 RADIOLOGY - THERAPEUTIC	P5E	RAT	0.00	0.00					0.00	0.00
296 NUCLEAR MEDICINE	P5E	NUC	0.00	0,00					0.00	0.00
297 RESPIRATORY THERAPY	P5E	RES	0.00	0.00					0.00	0.00
298 PULMONARY FUNCTION TESTING	P5E	PUL	0.00	0.00				1	0.00	0.00
299 ELECTROENCEPHALOGRAPHY	P5F	EEG	0.00	0.00					0.00	0.00
300 PHYSICAL THERAPY	P5F	PTH	0.00	0.00					0.00	0.00
301 OCCUPATIONAL THERAPY	P5F	ОТН	0.00	0.00					0.00	0.00
302 SPEECH LANGUAGE PATHOLOGY	P5F	STH	0.00	0.00					0.00	0.00
303 OBSERVATION	P5F	OBV	0,00	0,00					0.00	0.00
304 AUDIOLOGY	P5F	AUD	0.00	0.00					0.00	0.00
305 OTHER PHYSICAL MEDICINE	P5F	OPM	0,00	0,00					0.00	0.00
306 RENAL DIALYSIS	P5G	RDL	0,00	0.00					0.00	0.00
307 ORGAN ACQUISITION	P5G	OA	0.00	0.00					0.00	0.00
308 AMBULATORY SURGERY	P5G	AOR	0.00	0.00					0.00	0.00
309 LEUKOPHERESIS	P5G	LEU	0.00	0.00					0.00	0.00
310 HYPERBARIC CHAMBER	P5G	HYP	0.00	0,00					0.00	0.00
311 FREE STANDING EMERGENCY SVCS	P5G	FSE	0.00	0.00					0.00	0.00
312 LITHOTRIPSY	P5G	LIT	0.00	0.00					0.00	0.00
313 REHABILITATION	P5H	RHB	0,00	0.00					0.00	0.00
314 TRANSURETHAL MICROWAVE THER.	P5H	TMT	0.00	0.00					0.00	0.00
315 ONCOLOGY CLINIC	P5H	OCL	0.00	0,00					0.00	0.00
316 TRANSURETHAL NEEDLE ABLATION	P5H	TNA	0.00	0.00					0.00	0.00
317 ADULT PSYCH	P5H	PAD	0.00	0.00					0.00	0.00
318 PSYCH CHILD/ADOLESCENT	P5H	PCD	0.00	0.00					0.00	0.00
319 PSYCHIATRIC GERIATRIC	P5H	PSG	0.00	0.00					0.00	0.00

INSTITUTION NAME: INSTITUTION NUMBER: BASE YEAR Saint Agnes Hospital 11.00 43,281.00

	DISTRIBUTIONS			CAFETERIA, PARKING E	TC ALLOC	DATA PROCES	SSING ALLOC				
				COL. 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	COL 8
						Allocated		WAGES, SALARIES	Other	DP	Col. 2 + Col. 7
		SCHED	CODE	FTE	B1*D1	Amount.	Basis	& BENEFITS	Expenses	ALLOCATION	Total Alloc Expense
320	INDIVIDUAL THERAPIES	P51	ITH		0.00					0.00	0.00
321	GROUP THERAPY	P5I	GTH	0.00	0.00					0.00	0.00
322	PSYCH TESTING	P5I	PST	0.00	0.00					0.00	0.00
323	EDUCATION	P5l	PSE	0.00	0.00					0.00	0.00
324	OTHER THERAPIES	P5I	OPT	0.00	0.00					0.00	0.00
325	ACTIVITY THERAPIES	P5I	ATH	0.00	0,00					0.00	0.00
326	FREE STANDING CLINIC	UR1	FSC1	1.81	1.06	0.00	0.00	0.00	0.00	0.00	1.06
327	HOME HEALTH SERVICES	UR2	HHC	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
328	RENAL DIALYSIS O.P.	UR3	ORD	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
329	SKILLED NURSING CARE	UR4	ECF1	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
330	LABORATORY - NON PATIENT	UR5	ULB	18.15	10.58	0.00	0.00	0.00	0.00	0.00	10.58
	PHYSICIANS PART B SERVICES	UR6	UPB	471.46	274.91	0.00	0.00	0.00	0.00		274.91
332	PSCYH ADULT	P3H	PAD	0.00	0.00					0.00	0.00
333	PSYCH CHILD/ADOLESCENT	P3H	PCD	0.00	0.00					0.00	0.00
334	PSYCH GERIATRIC	P3H	PSG	0.00	0.00					0.00	0.00
335	INDIVIDUAL THERAPIES	P3I	ITH	0.00	0.00					0.00	0.00
336	GROUP THERAPIES	P3I	GTH	0.00	0.00					0.00	0.00
337	PSYCH TESTING	P3I	PST	0.00	0.00					0.00	0.00
338	EDUCATION	P3I	PSE	0.00	0.00					0.00	0.00
339	OTHER THERAPIES	P3I	OPT	0.00	0.00					0.00	0.00
340	ACTIVITY THERAPIES	P3I	ATH	0.00	0.00					0.00	0.00
341	CERTIFIED NURSE ANESTHETIST	UR7	CNA	15.37	8.96	0.00	0.00	0.00	0.00	0.00	8.96
342	PHYSICIANS PART B SERVICES	UR8	PSS	69.54	40.55	0.00	0.00	0.00	0.00	0.00	40.55
343		0 UR9	TBA3	43.40	25.30	0.00	0.00	0.00	0.00	0.00	25.30
344		0 UR10	TBA4	1.73	1.01	0.00	0.00	0.00	0.00	0.00	1.01
345		0 UR11	TBA5	7.00	4.08	0.00	0.00	0.00	0.00	0.00	4.08
346		0 UR12	TBA6	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
347		0 UR13	TBA7	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
348		0 UR14	TBA8	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
349		0 UR15	TBA9	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
350		0									
351											
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RECONCILIATION OF BASE YEAR EXPENSES

TO SCHEDULE RE

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

	Expenses	Sources	HSCRC Regulated	Unregulated	Total	
Α	Unassigned Expense	Sch. UA, Lines C-B,Col, 10	\$35,029.96	\$7,039.34	\$42,069.30	Α
В	Physicians Part B Services	P2 Ln A Col 7 UR6 Ln B Col 3	\$0.00	\$97,368.40	\$97,368.40	В
С	Physician Support Services	Sch. P3, Line A, Col. 7 UR, Line B, COL. 3	\$0.00		\$0.00	С
D	Resident, Intern Services	Sch. P4 & P5 , Line A, Col. 7	\$7,967.47	\$0.00	\$7,967.47	D
E	Overhead Expense Survey	Sch OES, Line P, Col. 1	\$104,973.90	\$0.00	\$104,973.90	E
F	Patient Care Centers	Schs D1 - D81, Line B, Col. 4	\$169,730.60	XXXXX	\$169,730.60	F
G	Auxiliary Enterprises	Schs E1 - 9, Line B, Col 3	\$1,282.18	\$2,487.12	\$3,769.30	G
Н	Other Institution Programs	Schs F1 - F4, Line B, Col 3	XXXXX	\$0.00	\$0.00	Н
1	Unregulated Services	Schs UR1-UR9 - line B & C	XXXXX	\$26,585.00	\$26,585.00	-1
J	Total Operating Expenses	A+B+C+D+E+F+G+H+I	\$318,984.10	\$133,479.86	\$452,463.97	J
K	Non-Operating Expenses	Non-Operating Expenses	XXXXX	\$2,422.00	\$2,422.00	K
L	Total Expenses	J+K	\$318,984.10	\$135,901.86	\$454,885.97	L
М	Total Operating Expenses - RE sch	Sch RE, Line S	\$318,614.79	\$133,849.71	\$452,464.50	M
N	Non-Operating Expenses - RE sch	Sch RE, Line V	XXXXX	\$2,422.00	\$2,422.00	N
0	Total Expenses - RE sch	M + N	\$318,614.79	\$136,271.71	\$454,886.50	0
Р	Reconciliation Amount	0-L	(\$369.31)	\$369.84	\$0.54	Р
Q	Nomenclature	XXXXX	XXXXX	XXXXX	XXXXX	Q
Q1	Other Non-Operating Expense	Audited Financial Statements	\$0.00	\$0.00	\$0.00	Q1
Q2	Rounding		(\$0.6)	\$0.0	(\$0.5)	Q2
Q3	O/H Exp Alloc to Aux Ent	Schs E2, E7-E9	\$0.00	\$0.00	\$0.00	Q3
Q4	Aux Ent Loss Treated as Fringe	Sch OA	\$370	(\$370)	\$0.00	Q4
Q5	Capital Facilities Allow to E, F, UR		\$0.00	\$0.00	\$0.00	Q5
Q6	Ineligible I&R		\$0.00	\$0.00	\$0.00	Q6
Q7	*				\$0.00	Q7

STATEMENT OF REVENUE AND EXPENSES

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

		COL 1	COL 2	COL 3	
		Regulated	Unregulated	Total	
	Operating Revenues:	xxxx	XXXX	XXXX	
Α	Gross Revenues from Daily Hospital Services	95.457.20	178,218.94	273,676.14	Α
В	Gross Revenues from Ambulatory Services	52.958.50	0.00	52.958.50	В
Ċ	Gross Revenues from Inpatient Ancillary Services	156.957.30	0.00	156,957,30	С
Ď	Gross Revenues from Outpatient Ancillary Services	133.322.90	0.00	133,322.90	D
Ē	Gross Patient Revenues	438,695,90	178,218.94	616,914.84	
_	Deductions from Revenues:	XXXX	XXXX	XXXX	
F	Provision for Bad Debts	406.63	4,100.45	4,507.08	F
	Charity/Uncompensated Care	21,651.84	2,303.04	23,954.88	G
H	Contractual Adjustments	29.006.59	89,596.29	118,602.87	Н
H1	Uncompensated Care Fund Payments	0.00	0.00	0.00	H1
	Denials	11,725.00	2,636.88	14,361.88	H2
1	Other Deductions from Revenues	9,950.50	0.00	9,950.50	
J	Total Deductions from Revenues	72,740.56	98,636.66	171,377.22	J
J1	Uncompensated Care Fund Receipts	3,831.50	0.00	3,831.50	J1
K	Net Patient Revenues	369,786.84	79,582.28	449,369.13	K
Ĺ	Other Operating Revenues	1,981.30	7,397.96	9,379.26	L
М	Net Operating Revenues	371,768.14	86,980.24	458,748.38	М
	Operating Expenses:	xxxx	XXXX	XXXX	
N	Salaries, Wages, and Employee Benefits	150,964.13	105,983.87	256,948.00	N
0	Professional Fees	15,885.00	0.00	15,885.00	
Р	Supplies	57,879.00	0.00	57,879.00	
Q	Depreciation/Amortization, Leases/Rentals	20,655.54	7,037.96	27,693.49	
R	Other Expenses	73,231.12	20,827.89	94,059.01	
S	Total Operating Expenses	318,614.79	133,849.71	452,464.50	
T	Excess (Deficit) Operating Revenues Over Operating Expenses	53,153.35	-46,869.47	6,283.88	
U	Non-Operating Revenues	XXXX	1,880.00	1,880.00	
V	Non-Operating Expenses	XXXX	2,422.00	2,422.00	+
W	Excess (Deficit) Revenues Over Expenses	53,153.35	-47,411.47	5,741.88	
Х	Operating Expenses per EIPD	2.69	XXXX	XXXX	X
Υ	Operating Expenses per EIPA	12.14	XXXX	XXXX	Y
z	Working Capital Ratio = Current Assets/Current Liabilities	0.8	xxxx	xxxx	Z
AA	Admissions	15,292	12	15,292	W
	EIPA's	26.577	-	21,907	Х

Hospital	Name
Haendal	Numbe

	Saint Agnes Hospital	
0011		

FY2018 RECONCILIATION OF THE AUDITED FINANCIALS TO SCHEDULE RE

	Audited		Auxiliary Enteroraes. Other Institutional Programs and Unregulated																1
	Financial	Miscellaneous	E4	E.5	E 6 Pt Phones	E 7 Cafeteria	E8	UR 1	Non-Pt Lab	UR 6	UR7	UR 8 Physician Support Services	UR 9 FreeStandin g Imaging	Other UR	UR 11 Ambulatory Surgery Center	Total	Total Regulated		RÉ
		Adjustments	Other Office	e Retail Ops			Day Care	FSC										Total	Lin
Revenue:																			T
Gross Palieni Revenue	606,964.3	9,950.5						326.4	7,748.4	132,570.0	7,0303	7,890,3	19.893.7		2,759 9	178.218.9	438 695 9	616 914 9	E
Deductions from Patient Revenue:																			t
Chanty Care/UCC	23 954 9							65.0	1725	1.699 5	49.1	26.4	260 9	11.4	18.3	2.303 0	21,651.8	23,954.9	G
Provisions for Bad Debts	4,875.6	(368.5)						24.5	340.3	3,163.4	167.9	1698	201.8	(11.4)	44.0	4,100.4	406.6	4,507 1	F
Contractual Adjustments	114 771 4	3.8315						87.8	3.826.9	64 650 3	42745	3.557.2	11.9973	(2225)	1.424.8	89 596 3	29 006 6	118 602 9	Н
UCC Fund Payments																			H1
Denais	14 361 9							63	441.0	1.6192	33	1453	289 5	0.0	132.2	2 636 9	11,725 0	14 361 9	H
Other Deductions		9.950.5							-								9 950 5	9.950 5	1
Total Deductions	157,963.7	13,413.5						1837	4,780 7	71,132.4	4,494 8	3,886	12.7495	(222 5)	1 619 4	98 636 7	72,740 6	171.377.2	1
UCC Fund Receipts		3.831.5															3.831.5	3.831 5	J1
Nel Patient Revenue	449,000.6	368.5						1428	2.957.7	61,437 6	2 535 4	3 991 6	7,144.2	222 5	1,140 6	79 582 3	369,786 9	449 369 1	к
Other Operating Revenue	9,379.2		48	430.1	47.0	1,720.2	17.8	363 9	1,2109	3,1321			1.7	425 9	03	7.398 0	1,981 3	9.379.2	L
Total Operating Revenue	458 379 9	368 5	48	430 1	47.0	1,720.2	17.8	506.6	4,178.6	64 569 6	2 535 4	3.991 6	7,1459	64B 4	1,140.9	86 980 2	371,768.1	458.748.4	M
Operating Expenses:																			
Salaries, Wages & Benefits	256,948.0			1877	103.0		897	220.4	1,009 0	83,319 2	4,308 8	10.695 5	5,165 7	1985	686 5	105.983.9	150,964 1	256 948 0	N
Professional Fees	15,885.0																15,885.0	15,885.0	0
Supplies	57,879 0																57,879 D	57,879 0	P
Purchased Services & Other	98.502.0	(7,148.0)	108	2021	151.1	1,720.2	(71.9)	420.7	2,4723	14,324 1	170.7		949 4	293	351 3	20 827 9	70,526 1	91,3540	R
Depreciation/Amortization	-20,177 0		364	7			-	03		1,378.4			360 8		24 1	2 128 4	18,048 6	20,177.0	0
Leases/Rentals		7.516.5							429	4,295 1			457.1		1145	4 909 6	2,606 9	7,516.5	G
Interest	2,705.0			5 16													2,705.0	2,705.0	B
Provision for Bad Debts																		- 0	Т
Total Operating Expenses	452 096 D	368.5	473	3 389 8	254 1	1,720.2	17.8	641.4	3.524.2	103,316.8	4,479.5	10,695.5	6,933 0	227 8	1,176 4	133 849 7	318,6148	452,464 5	S
Income from Operations	6 283 9	(0.0)	(425	3) 40.4	(207.1)	0.0	00	(134.8)	654.4	(38.747.2)	(1,944.1)	(6,703.8)	212.9	420 6	(35 5)	(46.869 5)	53,153 3	6,283 9	Т
Non-Operating Revenues	1,880.0															1,880 0		1,880.0	
Non-Operating Expenses	(2.422.0)															(2.422.0)	- 4	(2,422.0	0 1
Non-Operating Gains, Net	(542.0)													7,		(542 0)	-	(542 0	
Revenue & Gains in Excess													Service Servic	100	100				Г
of Expenses & Losses	5,741.9	(0 0)	(425	3) 40.4	(207.1)	0.0	00	(134.8)	664.4	(38 747 2)	(1,944.1)	(6,703.8)	2129	420 6	(35 5)	(47,411.5)	53,153.3	5.741.9	

6/30/2018

INSTITUTION NAME INSTITUTION NUMBER: Saint Agnes Hospital

BASE YEAR

COL 4 COLS COL 6 COL 7 COL 7 A COL 8 COL 9 COL 10 COLI COL 3 COL 2 LAUNDRY PURCHASING CENT SUPPLY PLANT. INPATIENT AMBULATORY OUTPATIENT MED STAFF UNASSIGNED HOUSEKEEPING PHARMACY **OPERATIONS** PAC, MRD PAC, MRD PAC, MRD ADMIN UNIT COST DIETARY & LINEN STORES EXPENSES OTH EXP SCHD # OF HOURS SOC SERV, OAO NET SO FEET FIS.MGT.NAD FIS.MGT.NAD FIS MGT NAD MEALS POUNDS CALCULATIONS 1,410.74 8,436,11 11,541,31 34.433.08 8.928 99 25,049.39 11,523.90 1,695.5 2,216,13 4,695,92 A Overhead Expenses 237,485.94 22 833 19 176,716 87 399,195,00 84.995.43 22,040,53 35.572.72 26,247.24 B Units 209 327 2 489 032 00 0.704174 0.405117 0.405117 0.053748 0.048525 C Cost per unit 0.008100 0.000890 0.205662 0.032356 0.028911 STATISTICAL APPORTIONMENT 164,599.00 27,397,59 \\\\\\\\ 47,832.12 MSG 151,166 821.188.00 1,279,00 72,873.00 D1 Med/Surg Acute 0.00 1111111111 1111111111 111111 0.00 PED 0.00 0,00 0.00 2 Pediatric Acute PSY 0.00 0.00 0.00 0.00 THIT 0.00 3 Psychiatric Acute OBS 15,324 85,522.00 90.60 6,679.00 15,086.0 1111111111 4,100.84 4 Obstetrics Acute 0.00 111111 0.00 0,00 5 Definitive Observation 0.00 DEF 0.00 9,775.96 6 Med/Surg Intensive Care MIS 6,741 90,462.00 336,50 5.971.00 13,488,00 6.396.94 0.00 14.60 mmm 20.51 7 Coronary Care 0.00 0.00 0 111111111 0.00 0 0.00 0.00 0.00 0.00 8 Pediatric Intensive Care 5.107.82 5,330.00 12.039.00 9 Neo-Natal Intensive Care NEO 0 11,524.00 235,20 3.222.98 0.00 0.00 0.00 10 Burn Care BUR 0.00 0.00 1111111111 1111111111 HHH 0.00 0.00 0.00 \\\\\\\\\ PSI 0 0.00 0.00 11 Psychiatric Intensive Care 0.00 0.00 TRM 0 0.00 0.00 0.00 12 Shock Trauma ONC 0.00 0.00 0.00 0.00 0.00 13 Oncology 1111111111 1111111111 2,060.44 XXXXX 24,365.00 2.40 2,697.56 6.094.00 1.262.3 14 Newborn Nursery NUR 0.00 0.00 15 Premature Nursery PRE XXXXX 0.00 0.00 0.00 HIHIIII 0.00 RHB 0.00 0.00 0.00 0.00 1111111111 16 Rehabilitation 0.00 0.00 0,00 0.00 \\\\\\\\ 111111 0.00 ICC 17 Intermediate Care 19,642.34 18 Emergency Services FMG 377 651 00 1 055 30 9,415.88 21.268.00 2.721.3 10,014.92 5,089.1 89.57 5 278 55 1111111111 2,903.5 8.692.90 19 Clinical Services XXXXX 21,993.00 969.20 7,936.73 17.927.00 170,856.00 10,509,00 1,198.20 5.350.11 \\\\\\\\\ 389.5 10:141.84 20 Observation OBV 33,019 222.90 4,652.15 0.00 0.00 PDC 0.00 21 Psych Day & Night Care 0.00 0.00 XXXXX 0.00 11.20 21.39 22 Lithotripsy LIT 0.00 11.20 0.00 2,366.29 23 Same Day Surgery SDS 3,077 15,920,00 32.20 2,141.90 4.838.00 1.396.96 2,763.0 0.00 0,00 24 Free Standing Emergency FSE 0,0 0.00 111111 13,283.00 3,503.06 -111111111 1.031 34 7,386.56 XXXXX 103 714 00 195.10 25 Labor & Delivery Services 5.880.73 OR XXXXX 422,033.00 3,768 80 14,872.02 33.592.00 6.541 BI \\\\\\\\ 6.471.92 22.824.54 26 Operating Room 261.70 15,94 36.00 111111 1,182.98 27 Operating Room Clinic ORC XXXXX 0,00 ППП 0.00 111111111 0.00 28 Ambulance Services-Rebundled AMR 0.00 0.00 1,693.35 ANS XXXXX 0,00 688.10 132,82 300.00 727.39 303.2 29 Anesthesiology 30.315.64 LAB 0.0 6,116.39 7,770,71 17,552.00 11,070.18 7,478.08 111111 XXXXX 30 Laboratory Services 0.00 0.00 111111111 111111111 0.00 0.00 0.00 31 Ambulatory Surgery (PBP) AMS. 4 916 00 752.94 2,725.00 32 Electrocardiography EKG XXXXX 7,902.00 306.00 2,176.44 THILL 825 08 1.418.02 33 Electroencephalography EEG XXXXX 13.828.00 543.90 1,099.73 2,484.00 276.19 \\\\\\\\\\\ 468 47 1.803 26 \\\\\\\\ 3,771,11 10,030,26 34 Radiology-Diagnostic RAD 107,666.00 441.20 9,530.10 19.884.00 XXXXX 7,193.36 1.803.80 7.311.00 155.77 3,672.1 35 Radiology-Therapeutic RAT XXXXX 32,991,00 3.236.76 588 48 1.957.49 9,548.00 120.40 4 150:99 9 376 00 367 21 HIHIHI 36 Nuclear Medicine XXXXX 37 CT Scanner XXXXX 26,011.00 351.70 1,193.14 IIIIII2,695.00 543.87 \\\\\\\\ 906.30 2,520.70 CAT 2,667.44 7,462.56 4,642.00 1,813.14 38 Interventional Radiology/Cardiovascular IRC XXXXX 19,426.00 849.10 1.328.18 111111 8,294.25 4,920.33 \\\\\\\\ RES XXXXX 0.00 826.70 2.240.63 5,061.00 581.96 39 Respiratory Therapy 3.30 180.19 IIIIII407.00 9.55 \\\\\\\\\ 339.6 610.45 XXXXX 0.00 40 Pulmonary Function Testing 1,676.10 1,046,16 2,363.00 1.676.60 2,806.51 4.280.00 41 Renal Dialysis RDL 1111111111 .337.06 111111 4,156,40 42 Physical Therapy PTH XXXXX 51 364 00 223.20 1.781.53 4.024.00 1.147.37 43 Occupational Therapy OTH XXXXX 0.00 14.10 1,004.99 nm2,270.00 612.88 \\\\\\\\\ 151.8 0.00 0.50 121.31 274.00 152.20 118.2 427.36 XXXXX 44 Speech Language Pathology STH 1111111111 0.00 0.00 0.00 REC 0.00 0.00 45 Recreational Therapy 0.00 46 Organ Acquisition OA XXXXX 0.00 0.00 0.00 0.00 0.00 47 Ambulatory Surgery AOR XXXXX 0.00 0.00 0.00 0.00 0.00 111111111 1111111111 0.00 0,00 0,00 0.00 0.00 48 Leukopheresis LEU XXXXX 328.40 38.00 49 Hyperbarie Chamber HYP XXXXX 0.00 172.90 0.0 111111 9.73 163_1 42.62 mm 0.00 496.74 min 1.122.00 70.07 \\\\\\\\\\\ 224.02 50 Audiology AUD XXXXX 21.50 51 Other Physical Medicine 0.00 0.00 0.00 0.00 ШШШ ШШШ 0.00 OPM XXXXX 0.00 52 Transurethral Needle Ablation TNA XXXXX 0.00 0.00 0.00 0.00 1,267.62 MRI 70,788,00 209,20 760.55 1.717.00 405.34 \\\\\\\\\\\ 303.82 53 Magnetic Resonance Imaging XXXXX 0.00 0.00 0.00 IIIIII0.00 0.00 OCL XXXXX 54 Oncology Clinic 0.00 0.00 55 Transurethral Microwave Thermotherapy 0.00 0.00 TMT 0.00 XXXXX 0.00 15,102.00 56 Admission Services ADM XXXXX XXXXX 944 28 57 Med/Surg Supplies 952.01 3,890.98 MSS XXXXX XXXXX 0_00 2,566,53 0.00 1,614-52 MIMMI 0.00 4,925.30 2,031.17 \\\\\\\\\\ 2 894 14 7,786,14 58 Drugs Sold XXXXX XXXXX 22,040.53 209,327 2,489,032.00 22,833.19 176.716.87 8,436.11 399,195.00 84,995.43 35,572.72 26,247.24 237,485.94 E TOTAL CITECK UNITS OK IF 0

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BASE YEAR 6/30/2018 INSTITUTION NAME

52 Oncology Clinic

53 Admission Services

53 Mcd/Surg Supplies

54 Drugs Sold

E TOTAL

52 Transurethral Microwave Thermotherapy

Saint Agnes Hospital

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INSTITUTION NUMBER 0011 COL 1 COL 2 COL 3 COL 4 COL 5 COL 6 COL 7 COL 8 COL 8 A COL 9 COL 10 COL 11 COL 12 COL 13 LAUNDRY PURCHASING CENT SUPPLY PLANT TOTAL INPATIENT: AMBULATORY OUTPATIENT MED STAFF TOTAL TOTAL ALLOCATED DIETARY & LINEN STORES HOUSEKEEPING PHARMACY OPERATIONS PATIENT CARE PAC, MRD PAC, MRD PAC, MRD ADMIN UNASSIGNED OTHER ALLOCATED EXPENSES OVERHEAD CENTERS MEALS POUNDS OTH EXP SCHD # OF HOURS SOC SERV, OAO NET SQ FEET OVERHEAD FIS.MGT.NAD FIS.MGT.NAD FIS.MGT.NAD EIPAs OVERHEAD 34,433.08 8,928 99 25,049.39 1,410,74 11,523.90 81,346.10 115,648.97 A Overhead Expenses 1.695.50 2,216,13 4,695.92 5,717.90 8,436.11 11,541.31 34,302.87 REVENUE CENTERS D1 Med/Surg Acute MSG 9,335.30 13,420.26 22,755,56 1,224.41 263.04 4,758 80 11,099.22 //////////// mmmm municini 2,321.03 2 Pediatric Acute PED *Immunum* mmmm 0.00 0.00 autummi mmmm mmmm. 0.00 0.00 3 Psychiatric Acute PSY mmmm ammini. mannimi mmmmm 4 Obstetrics Acute OBS 124.12 76:15 18 63 216.11 /////////// 436.16 871.16 931.16 ///////////// mmimm mmmm 198.99 1,130,16 2,001.32 0,00 0.00 5 Definitive Observation DEF ummumm umumm mmmm 54.60 80.54 69.21 193.20 mmm 389.96 787.51 2,591.51 mannin 474.37 3,065.88 3,853.39 6 Med/Surg Intensive Care MIS 7 Coronary Care CCU ammanan mmmm mamman *IIIIIIIIIIII* mumm 0.00 mmmm 1.00 6.91 6.91 HHHHHHHH mminmi mmmm minnim monum mummu mmmm 0.00 0.00 8 Pediatric Intensive Care PIC HHIIIHHII mumin 247.85 2,132.69 NEO 579.16 9 Neo-Natal Intensive Care minimi mmman IHHIIIIIII 0.00 10 Burn Care BUR mmmm 0.00 mmmmm umuum mummu 11 Psychiatric Intensive Care umminini mmmm mmmmm ummumu THINHHIMI mmmm mmmm ummum minnimi mminmi 0.00 0.00 PSI 0.00 0.00 12 | Shock Trauma TRM 0.00 13 Oncology ONC mannun mannin attenunt mmmm mmin 0.00 0.00 munnu *mannann* mmmm ummmi ummini 14 Newborn Nursery NUR mmmm 21.69 176.19 286.69 mmmmm mmmm 99.98 611.38 898.07 15 Premature Nursery PRE mmmm ummum 0.00 mmmm mmmini mmmm mmmm 0.00 0.00 16 Rehabilitation RHB IIIIIIIIIIIIII mmmmm mmanm 0.00 0.00 0.00 0.00 17 Intermediate Care ICC mmmm THUTTHUM. 18 Emergency Services EMG ummumi. 336.24 217.04 614 89 1,472.83 1.102.47 6.386.36 7,859.19 2,752.59 3,746,60 19 Clinical Services CL mmm 19.58 199.33 518.30 994.01 36.29 156.06 421.82 3,165,89 OBV 267.45 152.12 45.84 150.53 minni 303.83 919.77 485.41 2,167,42 20.94 492.13 4.085.66 20 Observation 21 Psych, Day & Night Care PDC mmmm IIIIIIIIIIIII 11111111111111 mummm 0.00 /////////// 11117771111111 muum 0.00 0.00 2.30 /// 1.04 8 92 11.23 22 Lithotripsy LIT 114 82 1,084.16 23 Same Day Surgery SDS 24.92 14.17 6,62 69.30 mmmm 139.87 565.93 148.51 829.26 24 Free Standing Emergency FSE ummunn mmmm mmmmm mmmmm 0.00 0.00 DEL 92.34 40.12 384.03 706,78 358 43 2,503.82 3,210,59 25 Labor & Delivery Services HUMHHHH 26 Operating Room ORmmmm 375.76 775.10 971.19 2,603.26 1.107.55 8,315.10 10,918 36 27 Operating Room Clinic 53.82 ORC mmmm 1.04 55.38 57.40 502.88 558:26 28 Ambulance Services-Rebundled AMR MIMMINI mmmm William Co. mmmm mmmm HIMMININ munnun mmmm 0.00 0.00 29 Anesthesiology ANS minimi 8.67 154.49 82.17 590.39 744.88 munn 30 Laboratory Services LAB minimi 1,257.91 251.43 [[[[[[[]]]]]]][[[[507.45 2.016.79 1.471.05 11,221,64 13,238.43 munimi 31 Ambulatory Surgery (PBP) AMS ummumi mmmmm HIIIIIIIIIIII mmmm mmmm 0.00 //////////// ummmm. mmmmm mmmmm. mmmm 0.00 0.00 EKG 142.13 996.68 1,279,20 Electrocardiography mmmm. mmamu 282.52 mmm minim 33 Electroencephalography EEG 12.31 111.86 35.58 *Immunini* 71.82 231.57 329 89 1//////////// 68.81 510.59 742 16 mama 34 Radiology-Diagnostic RAD ummumin 95.86 90.74 574 XX 1.069.83 2 655 52 17111111111 485 71 3 872 77 4 942 60 35 Radiology-Therapeutic RAT 29.37 370.97 211.37 349.05 2,998.02 3,714.46 mmmi 716.45 36 Nuclear Medicine NUC umummi. 8.50 24.76 271.07 438 65 94.99 658.14 1,096.79 37 CT Scanner CAT umummi 23.16 72.33 77.92 212.01 220 33 //////////// 638.19 ///////////// 122 32 980.84 1,192.85 38 Interventional Radiology/Cardiovascular IRC 17.30 174.63 134.21 369.11 362.12 2 974 99 3.344.10 39 Respiratory Therapy mmmm mmmmm 170.02 146.32 388 84 409 80 402.47 2.805.59 3,194.43 5.83 18.28 3.87 239 14 mmmi 40 Pulmonary Function Testing PUL. 0.68 11.77 29.62 272.63 290.91 41 Renal Dialysis RDL ummmu 344 71 68 32 450 69 679.22\1111111111111 mamman 136.18 X15 40 1 266 00 42 Physical Therapy PTH mmmmu 45.73 45.90 116.34 265.62 464 82 //////////// 201.69 1,603.03 1,873.65 43 Occupational Theraps HTO tittitititi. mmmmm 2.90 32.52 MAHAMA 65.63 101.05 248.29 minim 106.90 mumm. 59.24 414.43 515.48 minimin 20.74 44 Speech Language Pathology STH 0.10 7.92 11.95 165.68 177.63 45 Recreational Therapy REC mmmm mmmm 1111111111111111 mmmm mmmm mmmm mmmm 0.00 0.00 46 Organ Acquisition 0.00 OA mum mmmm 0.00 /////////// (IIIIIIIIII) 0.00 47 Ambulatory Surgery mmmmi AOR mminim THINININI nummm mamma mmmm mmmum mmmm mminni 0.00 0.00 48 Leukopheresis LEU amanani mmmm mmmmm memm mmmm mmmm mmmm mannin mmmm 0.00 0.00 49 Hyperbaric Chamber HYP IMMINIMI 134,78 171.44 mamman 36,66 50 Audiology AUD mmmm 4.42 32.44 52.93 10.87 69.27 122.20 50 Other Physical Medicine OPM mmmm mmmmm mmmm mmmm manmini mmmmi mmmm mmmm mmmm mmmm 0.00 0.00 51 Transurethral Needle Ablation TNA mmmmi mamm HIIIIIIIIIII manna mannann. mmmmm ummmu mmmm 0.00 0.00 51 Magnetic Resonance Imaging MR1 mannon 63.03 43.02 49.64 180 30 213.94 HIIIIIIIIIIIII 61.3 439.66 619.96

Departmental Equipment Allowance

INSTITUTION NAME Saint Agnes Hospital BASE YEAR 6/30/2018

INSTITUTION NUMBER 0011

	ſ	COL. 1	COL. 2	COL. 3	COL. 4	COL. 5	COL. 6	COL. 7	COL. 8
		COST		CUMULATIVE		MARKET VALUE	CUMULATIVE	LEASE	DEPR/AMORT
		BASE YEAR	#YRS	PURCHASE	DEPRECIATION	BASE YEAR	LEASES	AMORTIZATION	TOTAL
	CENTER	PURCHASES		TOTAL	COL. 3/COL. 2	LEASES	TOTAL	COL. 6/COL. 2	COL. 4 + COL. 7
H2 A	MIS	\$0.00	10	\$580.46	\$58.05	\$0.00	\$0.00	\$0.00	\$58.05
H2 B	CCU	\$0.00	10	\$9.43	\$0.94	\$0.00	\$0.00	\$0.00	\$0.94
H2 C	PIC	\$0.00	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 D	NEO	\$0.00	10	\$1,450.06	\$145.01	\$0.00	\$0.00	\$0.00	\$145.01
H2 E	BUR	\$0.00	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 F	TRM	\$0.00	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 G	ONC	\$0.00	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 H	OR	\$114.74	10	\$12,285.24	\$1,228.52	\$0.00	\$0.00	\$0.00	\$1,228.52
H2 I	AOR	\$0.00	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 J	LAB	\$415.87	10	\$2,197.63	\$219.76	\$0.00	\$0.00	\$0.00	\$219.76
H2 K	IRC	\$150.74	10	\$3,157.52	\$315.75	\$0.00	\$0.00	\$0.00	\$315.75
H2 L	RAD	\$0.00	10	\$1,901.49	\$190.15	\$0.00	\$0.00	\$0.00	\$190.15
H2 M	CAT	\$25.94	6.5	\$1,402.97	\$215.84	\$0.00	\$534.29	\$82.20	\$298.04
H2 N	RAT	\$318.83	10	\$5,268.61	\$526.86	\$0.00	\$0.00	\$0.00	\$526.86
H2 O	NUC	\$0.00	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 P	RDL	\$0.00	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 Q	HYP	\$0.00	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 R	DTY	\$19.92	10	\$190.77	\$19.08	\$0.00	\$0.00	\$0.00	\$19.08
H2 S	LL	\$17.48	10	\$190.57	\$19.06	\$0.00	\$0.00	\$0.00	\$19.06
H2 T	MGT	\$233.35	10	\$551.92	\$55.19	\$0.00	\$0.00	\$0.00	\$55.19
H2 U	EDP	\$2,054.20	10	\$16,182.05	\$1,618.20	\$0.00	\$0.00	\$0.00	\$1,618.20
H2 V	MRI	\$0.00	6	\$6.50	\$1.08	\$0.00	\$0.00	\$0.00	\$1.08
H2 W	LIT	\$0.00	5	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 X	ETH	\$0.00	10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 Y	TRP	\$0.00	5	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2 Z	TMT	\$0.00	5	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
		Total		\$45,375.23	\$4,613.50	\$0.00	\$534.29	\$82.20	\$4,695.70

INSTITUTION NAME
Saint Agnes Hospital
BASE YEAR
6/30/2018

INSTITUTION NUMBER 0011

		COL 1	COL 2	COL 3	COL 4	COL. 5	COL 6	COL 7	COL 8
	ALLOWANCE	SOURCE	GENERAL	DIETARY	LAUNDRY	COMM.	DATA PROC.	DEPT.	TOTAL
A	TOTAL INTEREST	HOSP RECORDS		111111111111	11111111111	11111111111	11111111111		111111111111
B	TOTAL DEPRECIATION	HOSP RECORDS	20,653.956	111111111111	11111111111	11111111111	11111111111	111111111111	111111111111
c	CAP INTENSIVE EQUIP DEPR	H2 TOTAL	4,695.7	\$19.08	\$19 06	\$55.19	\$1,618.20	\$2,984.17	\$4,695.70
	BLDG & GEN EQUIP DEPR	B-C	15,958 3	11111111111	11111111111	11111111111	11111111111	11111111111	\$15,958.28
F	BLDG & GEN EQUIP DEPR & INT	A+D	15,958 3	111111111111	11111111111	11111111111	11111111111	11111111111	\$15,958.26
F	STANDARD UNITS		399,195	209,327	2,489,032	142,609	142,609	11111111111	111111111111
G	ALLOWANCE PER UNIT		0.039976	\$0,000091	\$0.000008	\$0.000387	\$0.011347]]]]]]]]]]	11111111111

	DISTRIBUTION	CODE	NET SQ. FT. BASIS							
H01	MEDICAL/SURGICAL	MSG	164,599	6,580.0	\$13.78	\$6 29	\$10.60	5310,89	инини	\$6,921.58
H02	PEDIATRIC	PED	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	11111111111	\$0.00
	PSYCHIATRIC	PSY	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	11111111111	\$0.00
HD4		OBS	15,086	603.1	\$1.40	\$0.65	\$0.89	\$26.08	HIHHHH	\$632 10
	DEFINITIVE OBSERVATION	DEF	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	11111111111	\$0.00
H06		MIS	13,488	539 2	\$0.61	\$0.69	\$2.48	\$72.59	\$58.05	\$673.62
H07	CORONARY CARE	ccu	0	0.0	\$0.00	\$0.00	\$0.01	50.17	50.94	\$1.12
	PEDIATRIC ICU	PIC	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	50.00
	NEO NATAL ICU	NEO	12,039	481.3	\$0.00	\$0.09	\$1.25	\$36,57	\$145.01	\$564.19
	BURN CARE	BUR	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H11		PSI	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	11111111111	\$0.00
H12		TRM	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H13		ONC	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	50.00	\$0.00
H14		NUR	6.094	243.6	11111111111	\$0.19	\$0.49	\$14.32	11111111111	\$258 61
H15		PRE	0	0.0	11111111111	\$0.00	\$0.00	\$0.00	11111111111	\$0.00
H16		RHB	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	11111111111	\$0.00
H17	INTERMEDIATE CARE	icc	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	11111111111	\$0.00
H18		EMG	21.268	850.2	\$0.00	\$2.89	\$4.93	\$144.52	11111111111	\$1,002.55
	CLINIC SERVICES	CL	17,927	716.7	11111111111	\$0.17	\$2.08	\$80.91	11111111111	\$779 81
	PSYCH DAY/NIGHT	PDC	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	11111111111	\$0.00
H21	AMBULATORY SURGERY (PBP)	AMS	0	0.0	\$0.00	\$0.00	\$0.00	\$0.00	HHHHHH	\$0.00
H22		SDS	4,838	193.4	\$0.28	\$0.12	\$0.54	\$15.85	11111111111	\$210.19
H23		MRI	1,717	68.6	HIHHHH	\$0.54	\$0.27	\$8 05	\$1.08	\$78.58
H24		DEL	13.283	531.0	11111111111	\$0.79	\$1.75	\$51,45	HHHHHH	\$584.99
H25	The state of the s	OR	33,592	1.342.9	11111111111	\$3.23	\$5.04	\$147.67	\$1,228.52	\$2,727.34
H25a		ORC	36	1.4	HIHIHIH	\$0.00	\$0.26	\$7.74	11111111111	\$9.44
H26		OBV	10.509	420.1	\$3.01	\$1.31	\$2.53	\$74.30	11111111111	\$501.26
H27		ANS	300	12.0	11111111111	\$0.00	\$0.40	\$11.69	11111111111	\$24.08
	MEDICAL SUPPLIES	MSS	0	0.0	HHHHHH	HHHHHH	\$0.99	\$29.12	11111111111	\$30.11
H29		CDS	0	0.0	11111111111	11111111111	\$1.91	\$55.89	11111111111	\$57_80
	LABORATORY SERVICES	LAB	17,552	701.7	11111111111	\$0.00	\$7.18	\$210.47	\$219.76	\$1,139.07

DISTRIBUTION OF CAPITAL FACILITIES ALLOWANCE

INSTITUTION NAME Saint Agnes Hospital BASE YEAR 6/30/2018

INSTITUTION NUMBER 0011

			COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	COL 8
	DISTRIBUTION		ADJ, SQUARE FOOTAGE BASIS	GENERAL	DIETARY	LAUNDRY	COMM	DATA PROC	DEPART	TOTAL
H32	ELECTROCARDIOGRAPHY	EKG	4,916	\$196.52	111111111111	\$0.06	30.61	\$17.91	111111111111	\$215.10
	INTERVENTIONAL RADIOLOGY/CARDI		4,642	\$185.57	11111111111	\$0.15	\$1.73	\$50.84	\$315.75	\$554.04
	RADIOLOGY-DIAG	RAD	19,884	5794.88	11111111111	\$0.82	\$2.16	\$63.25	\$190.15	\$1,051.26
	CT SCANNER	CAT	2,695	\$107.74	11111111111	\$0.20	\$0.56	\$16.46	\$298.04	\$423.00
	RADIOLOGY THERAPEUTIC	RAT	7,311	\$292 27	111111111111	\$0.25	\$1.48	\$43 44	\$526.86	5864.30
	NUCLEAR MEDICINE	NUC	9,376	\$374.82	11111111111	\$0.07	\$0.37	\$10.84	\$0.00	\$386.10
	RESPIRATORY THERAPY	RES	5,061	\$202.32	11111111111	\$0.00	\$2.13	\$62.44		\$266 89
	PULMONARY FUNCTION	PUL	407	\$16.27	11111111111	\$0.00	\$0.14	\$3 96	11111111111	\$20.37
H40		EEG	2,484	599.30	.11111111111	\$0_11	\$0.29	\$8.45		\$108.15
	PHYSICAL THERAPY	PTH	4,024	\$160.86	11111111111	\$0.39	\$0.96	\$28.19	11111111111	\$190.40
H42	OCCUPATIONAL THERAPY	OTH	2,270	\$90.75	11111111111	\$0.00	\$0.30	\$8.68	HHHHHH	599.73
H43	SPEECH/LANGUAGE	STH	274	\$10.95	11111111111	\$0.00	\$0.10	\$3.07	11111111111	\$14.12
	RECREATIONAL THERAPY	REC	0	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	11111111111	\$0.00
	AUDIOLOGY	AUD	1,122	\$44.85	11111111111	\$0.00	\$0.04	\$1.28	111111111111	\$46.17
	OTHER PHYS. MEDICINE	OPM	0	\$0.00			50.00	\$0.00	111111111111	\$0.00
	RENAL DIALYSIS	RDL	2,363	\$94.46	\$0.00	\$0.03	\$0.65	\$19.02	\$0.00	\$114.16
	ORGAN ACQUISITION	OA	0	\$0.00		\$0.00	\$0.00	\$0.00	11111111111	\$0.00
H49	LEUKOPHERESIS	LEU	0	\$0.00	11111111111	\$0.00	\$0.00	\$0.00		\$0.00
	HYPERBARIC CHAMBER	HYP	38	\$1.52	11111111111	\$0.00	\$0.07	\$1.96	\$0.00	\$3.55
H51	LITHOTRIPSY	LIT	0	\$0.00	11111111111	\$0.00	\$0.00	\$0.13	\$0.00	\$0.13
		TMT	0	50.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	TRANSURETHAL MICRO THERM	OCL	0	\$0.00		\$0.00	\$0.00	\$0.00		\$0.00
H53	ONCOLOGY CLINIC TRANSURETHRAL NEEDLE ABLATION		0	\$0.00		\$0.00	\$0.00	\$0.00		\$0.00
H54			399,195	\$15,958.24		\$19.04	\$55.19	\$1,618.20		\$20,653 92
1	SUBTOTAL	REG	399,193	\$0.00	minimi	213.04	900.10	91,010.20	11111111111	\$0.00
	RESEARCH		0	\$0.00					11111111111	\$0.00
	NURSING EDUCATION	RNS	0						11111111111	\$0.00
H57	OTHER HLTH PROF EDU	OHE		\$0.00 \$0.00					11111111111	\$0.00
H58	COMM HEALTH EDU	CHE	0	\$0.00					11111111111	\$0.00
H59	FREE STANDING CLINIC	FSC	0	\$0.00					111111111111	\$0.00
	HOUSING	HOU	0				\$0.00	\$0.00		\$0.00
H61	AMBULANCE	AMB	0	\$0.00			30.00	30.00	11111111111	\$0.00
H62	PARKING	PAR	0	\$0.00					11111111111	\$0.00
H63	CAFETERIA	CAF	0	\$0.00					11111111111	50.00
	DOCTOR OFFICE RENT	DPO	0	\$0.00					11111111111	\$0.00
	OFFICE OTHER RENT	OOR	0	\$0.00					11111111111	\$0.00
	RETAIL OPERATIONS	REO	0	\$0.00					11111111111	\$0.00
H67	PATIENT TELEPHONES	PTE	0	\$0.00					11111111111	\$0.00
H68	DAY CARE, ETC	DEB	0	\$0.00					111111111111	\$0.00
H69	HOME HEALTH SERVICES	HHC	0	\$0.00						\$0.00
H70	O/P RENAL DIALYSIS	ORD	0	\$0.00			20.00		111111111111	
H71	SKILLED NURSING CARE	ECF	0	\$0.00			\$0.00	50.00	11111111111	\$0.00
H72	LAB NON/PATIENT	ULB	0	\$0.00					11111111111	\$0.00
H73	PHYS PART B SERVICES	UPB	0	\$0.00					111111111111	\$0.00
H74	CERTIFIED NURSE ANEST.	CNA	0	\$0.00					11111111111	\$0.00
	TOTAL DISTRIBUTED	XYZ	399,195	\$15,958.24	\$0.00	\$19.04	\$55.19	\$1,618.20	\$0.00	\$20,653.92

THIRD PARTY DIFFERENTIAL

INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR

6/30/2018

INSTITUTION NUMBER:

0011

	SOURCE	INPATIENT	OUTPATIENT	TOTAL
		»—————————————————————————————————————		
CHARGES, DEDUCTIBLES, CBA		COL 1	COL 2	COL 3
A GROSS PATIENT REVENUE, HSCRC REGULATED	SCH RE, LINE E	252,414.50		438,695.90 A
B MEDICARE REVENUE, HSCRC REGULATED	RECORDS/BUDGET	114,099.00	60,712.00	174,811.00 B
C MEDICAID REVENUE, HSCRC REGULATED	RECORDS/BUDGET	16,420.00	4,105.00	20,525.00 C
D BLUE CROSS REVENUE, HSCRC REGULATED	RECORDS/BUDGET	25,294.00	31,909.00	57,203.00 D
E MCO SUBCONTRACTED MEDICARE, MEDICAID, HSCRC REGULATED **	RECORDS/BUDGET	57,644.00	47,636.00	105,280.00 E
F MEDICARE DEDUCTIBLES PAID BY MEDICAID & BC< HSCRC REGULATED	RECORDS/BUDGET	///////////////////////////////////////	///////////////////////////////////////	10,159.05 F
G UNCOMPENSATED CARE, HSCRC REGULATED***	RECORDS/BUDGET	7,161.83	14,896.64	22,058.47 G
G1 OTHER PAYORS	A-B-C-D-E-G	31,795.7	27,022.8	58,818.43 G1
RATIOS, LEVEL III COSTS			40	
H Ratio of Medicare & Medicaid Charges	Col 3 (B + C) /A	1111111111111	1111111111111	0.4453 H
I Ratio of Blue Cross Inpatient Charges	Col 1 D/Col 3 A	0.0577	1111111111111	///////////////////////////////////////
I1 Ratio of Blue Cross Outpatient Charges	Col 2 D/Col 3 A	///////////////////////////////////////	0.0727	//////////////////////////////////////
J Ratio of HMO Charges	Col 3 E/Col 3 A	///////////////////////////////////////	1111111111111	0.2400 J
K Ratio of Deductibles Paid by Medicaid & Blue Cross	Col 3 F/Col 3 A	///////////////////////////////////////	1111111111111	0.0232 K
L Ratio of Uncompensated Accounts	Col 3 G/Col 3 A	///////////////////////////////////////	1111111111111	0.0503 L
M Ratio of Other Payors Charges	Col 3 G1/Col 3 A	///////////////////////////////////////	1111111111111	0.1341 M
N Level III Costs	Schedule MA	///////////////////////////////////////	///////////////////////////////////////	315,762.07 N
DIFFERENTIAL CALCULATION		23		
O Gross Revenue HSCRC Regulated	*	///////////////////////////////////////	///////////////////////////////////////	349,794.85 O
P Payor Differential	1 - (Col 3 O/N)	///////////////////////////////////////	///////////////////////////////////////	0.1078 P

REVENUE CENTER RATE SUMMARY

INSTITUTION NAME: INSTITUTION NUMBER:

B TOTAL

Saint Agnes Hospital

33,095,562.65

171,445.25

34,302.87

81,346.10

0.00

8.013.96

295,108,18

BASE YEAR

6/30/2018

17,631,60

3.022.29

315,762.07

RESIDENT PAT CARE OTHER PHYSICIAN ------ C. F. A --UNITS LEVEL LEVEL DIRECT OVERHEAD OVERHEAD SUPPORT INTERN **BLDG & GENRL** DEPART-ΩF N/A **MEASURE EXPENSES EXPENSES EXPENSES EXPENSES EXPENSES** EQUIPMENT MENTAL 11 CODE COL 1 COL 3 COL 4 COL 5 COL 6 COL 7 COL 8 COL 11 DESCRIPTION 59,853.80 27,397.59 9,335,30 13,420,26 0.00 2,779.08 52,932.23 6,901.50 20.07 MSG 53,966,00 ///////// A1 Med/Surg Acute PED 0,00 0.00 0.00 0.00 JIIIIIIII 0.00 0.00 0.00 0.00 0.00 0.00 2 Pediatric Acute 0.00 0.00 3 Psychiatric Acute PSY 0.00 0.00 0.00 0.00 JIIIIIIII 0.00 0.00 0.00 0.00 OBS 5,308.00 2.298.51 871.16 1,130,16 IIIIIIII 0.00 0.00 4,299.83 630.10 2.05 4,931,98 4 Obstetrics Acute IIIIIIII 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 5 Definitive Observation DEF 0.00 0.00 MIS 4,832.00 6.396.94 787.51 3,065,88 IIIIIIIII 0.00 587.19 10,837,52 614.30 59.35 11,511.16 6 Med/Surg Intensive Care CCU 18.00 14.60 0.00 6.91 IIIIIIIII 0.00 57.82 79.33 0.20 0.94 80.48 Coronary Care 0.00 0.00 0,00 ///////// 0.00 0.00 0.00 0.00 8 Pediatric Intensive Care PIC 0.00 0.00 0.00 NEO 4,075.00 3,222.98 579,16 1,553.54 //////// 0.00 368.72 5.724.39 519.10 145.10 6,388.59 9 Neo-Natal Intensive Care 10 Burn Care BUR 0.00 0.00 0.00 0.00 //////// 0.00 0.00 0.00 0.00 0.00 0.00 11 Psychiatric Intensive Care PSI 0.00 0.00 0.00 0.00 IIIIIIIII 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 12 Shock Trauma TRM 0.00 0.00 0.00 0.00 IIIIIIIII 0.00 ONC 0.00 0.00 0.00 0.00 IIIIIIII 0.00 0.00 0.00 0.00 0.00 0.00 13 Oncology 14 Newborn Nursery NUR 4,796.00 1,262.36 286.69 611.38 111111111 0.00 163.22 2,323.65 258.40 0.19 2,582.24 0.00 0.00 0.00 15 Premature Nursery PRE 0.00 0.00 0.00 111111111 0.00 0.00 0.00 0.00 RHB 0.00 0.00 0.00 0.00 IIIIIIII 0.00 0.00 0.00 0.00 0.00 0.00 16 Rehabilitation 0.00 17 Intermediate Care ICC 0.00 0.00 0.00 0.00 //////// 0.00 0.00 0.00 0.00 0.00 EMG 711,838.00 12,736.29 1,472.83 6,386.36 //////// 0.00 505.75 21,101.22 999.70 2.89 22,103.81 18 Emergency Services 252.53 779.60 0.17 10,147,02 310,758.00 2,752.59 //////// 0.00 9,367.25 19 Clinical Services CL 5,368.11 994.01 OBV 130,507.00 6,548.31 919,77 3,165.89 IIIIIIII 0.00 588.65 11,222.62 496.90 4.32 11,723.84 20 Observation IIIIIIII 0.00 0.00 0.00 0.00 0.00 21 Psych. Day & Night Care PDC 0.00 0.00 0.00 0.00 0.00 22.53 2.30 0.00 0.00 22.43 0.10 0.00 22 Lithotripsy LIT 4.00 11.20 8.92 //////// SDS 5.526.00 1.396.96 254.90 829.26 ///////// 0.00 0.00 2,481.12 209.80 0.40 2,691.32 23 Same Day Surgery 24 Free Standing Emergency FSE 0.00 0.00 0.00 0.00 ///////// 0.00 0.00 0.00 0.00 0.00 25 Labor & Delivery Services DEL 103,980.00 4,534,39 706.78 2,503.82 //////// 0.00 7,744.98 584.20 0.79 8,329.97 2,603.26 ///////// 25,157.46 OR 975,029.00 13,013.73 8,315.10 0.00 1,225.38 1,495,60 1,231.75 27,884.82 26 Operating Room 27 Operating Room Clinic ORC 57,387.00 682.13 55.38 502.88 ///////// 0.00 1.10 1,241,49 9.40 0.00 1,250.89 *IIIIIIIIIII* IIIIIIIIII AMR 0.00 0.00 0.00 JIIIIIIII 0.00 0.00 28 Ambulance Services-Rebundled 0.00 1,478,584.00 154.49 0.00 1,863.58 24.10 0.00 ANS 1,030.64 590.39 IIIIIIII 88.06 1,887.68 29 Anesthesiology 11,221.64 LAB 18.020.891.00 18,548.26 2,016.79 IIIIIIIII 0.00 586.39 32.373.09 919.30 219.76 33.512.15 30 Laboratory Services 31 Ambulatory Surgery (PBP) 0.00 AMS 0.00 0.00 111111111 0.00 0.00 0.00 839,560.00 1,578.02 282.52 0.00 3,012,27 0.06 3,227.33 32 Electrocardiography EKG 996.68 111111111 155.05 215.00 312,646.00 744 67 231.57 510.59 ///////// 0.00 108.00 0.11 1,734.89 33 Electroencephalography EEG 139.96 1,626.78 34 Radiology-Diagnostic RAD 790,356.00 5,574,37 1,069.83 3,872.77 111111111 0.00 0.00 10,516,97 860.30 190.97 11,568,24 35 Radiology-Therapeutic RAT 961,834,65 3.827.95 716,45 2,998.02 111111111 0.00 0.00 7,542.42 337.20 527.11 8,406,73 20.68 0.07 2,459.23 36 Nuclear Medicine NUC 257,498.00 955.69 438,65 658.14 //////// 0.00 2,073.16 386.00 37 CT Scanner CAT 1,188,021.00 1,450,17 212.01 980.84 IIIIIIIII 0.00 0.00 2.643.02 124.80 298.24 3,066.06 38 Interventional Radiology/Cardiovascular IRC 129,467.00 4,480.58 369,11 2,974.99 ///////// 0.00 281.60 8,106.28 238.10 315.90 8.660.28 39 Respiratory Therapy RES 5,704,807.74 5,502.29 388.84 2,805.59 IIIIIIII 0.00 0.00 8,696.72 266.90 0.00 8,963.62 IIIIIIIII 148.72 788.79 20.40 40 Pulmonary Function Testing PUL 31,551.10 349.16 18.28 272.63 0.00 0.00 809.19 41 Renal Dialysis RDL 4,168.00 1,676.60 450.69 815.40 IIIIIIII 0.00 64.06 3,006.76 114.10 0.03 3,120.89 42 Physical Therapy PTH 332,240.80 2,484,44 265,62 1,608.03 //////// 0.00 0.00 4,358.09 190,00 0,39 4,548,48 141,769.00 0.00 99.70 0.00 1.379.87 43 Occupational Therapy OTH 764.69 101.05 414.43 //////// 0.00 1,280.17 44 Speech Language Pathology STH 40,774.00 270.47 11.95 165.68]]]]]]]]] 0.00 0.00 448.10 14.10 0.00 462.20 45 Organ Acquisition OA 0.00 0.00 0.00 0.00 IIIIIIIII 0.00 0.00 0.00 0.00 0.00 0.00 46 Ambulatory Surgery AOR 0.00 0.00 0.00 0.00 111111111 0.00 0.00 0.00 0.00 47 Leukopheresis LEU 0.00 0.00 0.00 0.00 IIIIIIII 0.00 0.00 0.00 0.00 0.00 0.00 48 Hyperbaric Chamber HYP 320.00 172.90 36.66 134.78 IIIIIIIII 0.00 0.00 344.34 3.60 0.00 347.94 49 Audiology AUD 20,196.00 112.69 52.93 69.27 111111111 0.00 0.00 234.89 46.20 0.00 281.09 50 Other Physical Medicine OPM 0.00 0.00 0.00 0.00 IIIIIIIII 0.00 0.00 0.00 0.00 0.00 0.00 51 Transurethral Needle Ablation TNA 0,00 0.00 0.00 0.00 IIIIIIIII 0.00 0.00 0.00 0.00 0,00 0,00 405,257.90 52 Magnetic Resonance Imaging MRI 709.16 180.30 439.66 111111111 0.00 0.00 1,329.13 77.00 1.62 1,407.75 53 Oncology Clinic OCL 0.00 0.00 0.00 0.00 //////// 0.00 0.00 0.00 0.00 0.00 0.00 Transurethral Microwave Thermotherapy TMT 0.00 0.00 0.00 0.00 111111111 0.00 0.00 0.00 0.00 0.00 0.00 55 Admission Services ADM 15,102.00 IIIIIIIIII 944.28 811.71 IIIIIIIII IIIIIIIIIII JJJJJJJJJJJ 1,755.99 0000000 1,755.99 56 Med/Surg Supplies MSS 26,247.24 20,788.30 2.566.53 1,513.26 ШШШ IIIIIIIIIII IIIIIIIIIII 24,868.09 30.10 24,898.19 57 Drugs Sold CDS 26,247.24 15,540.10 4,925.30 3,238.66 IIIIIIIII IIIIIIIIIII IIIIIIIIIII 23,704.06 57.80 1111111111111 23,761.86 58 111111111

REVENUE CENTER RATE SUMMARY

INSTITUTION NAME: INSTITUTION NUMBER:

Saint Agnes Hospital 0011 BASE YEAR

6/30/2018

	1	Q F	C		PAYOR		2222		LIGORO	ADJUST	****
		DIRECT	PERCENTAGE	LEVEL	DIFFER- ENTIAL	LEVEL IV	CROSS SUBSIDY	MISC ADJ	HSCRC ADJ	LEVEL IV	AVERAGE RATES
DESCRIPTION	CODE	COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	COL 8	COL 9	COL 10
1 Med/Surg Acute	MSG	0.00	533.00	59,853.80	6,451.00	66,304.80				66,304.80	1,228
00 Pediatric Acute	PED	0.00	0.00	0.00	0.00	0.00				0.00	
00 Psychiatric Acute	PSY	0.00	0.00	0.00	0.00	0.00				0.00	
00 Obstetrics Acute	OBS	0.00	43.90	4,931.98	531.60	5,463.58				5,463,58	1,02
.00 Definitive Observation	DEF	0.00	0.00	0.00	0.00	0.00				0.00	
.00 Med/Surg Intensive Care	MIS	0.00	102.50	11,511.16	1,240.70	12,751.86				12,751.86	2,63
00 Coronary Care	CCU	0.00	0.70	80.48	8.70	89.18				89,18	4,95
00 Pediatric Intensive Care	PIC	0.00	0.00	0.00	0.00	0.00				0,00	
.00 Neo-Natal Intensive Care	NEO	0.00	56.90	6,388.59	688.60	7,077.19				7,077.19	1,73
## Burn Care	BUR	0.00	0.00	0.00	0.00	0.00				0.00	
## Psychiatric Intensive Care	PSI	0.00	0.00	0.00	0.00	0.00				0.00	
### Shock Trauma	TRM	0.00	0.00	0.00	0.00	0.00				0.00	
## Oncology	ONC	0.00	0.00	0.00	0.00	0.00				0.00	
## Newborn Nursery	NUR	0,00	23.00	2,582,24	278.30	2,860.54				2,860.54	590
## Premature Nursery	PRE	0.00	0,00	0,00	0.00	0.00				0.00	
## Rehabilitation	RHB	0.00	0.00	0.00	0.00	0.00				0,00	
## Intermediate Care	ICC	0.00	0.00	0.00	0.00	0.00				0.00	
### Emergency Services	EMG	0.00	196.80	22,103.81	2,382.30	24,486.11				24,486,11	34
## Clinical Services	CL	0.00		10,147.02	1,093.60	11,240.62				11,240.62	31
### Observation	OBV	0.00	104.40	11,723.84	1,263.60	12,987.44				12,987.44	9
### Psych. Day & Night Care	PDC	0.00		0.00	0.00	0.00				0.00	
Lithotripsy	LIT	0.00		22.53	2.40	24.93				24.93	6,23
## Same Day Surgery	SDS	0.00		2,691.32	290.10	2,981,42				2,981.42	53
## Free Standing Emergency	FSE	0.00		0.00	0.00	0.00				0.00	
## Labor & Delivery Services	DEL	0.00		8,329.97	897.80	9,227,77				9,227.77	8
### Operating Room	OR	0.00		27,884.82	3,005.40	30,890.22				30,890,22	3
### Operating Room Clinic	ORC	0.00		1,250.89	134.80	1,385.69				1,385.69	24
## Ambulance Services-Rebundled	AMR	0.00		0.00	0.00	0.00				0.00	
### Anesthesiology	ANS	0.00		1,887.68	203.50	2,091.18				2,091.18	
### Laboratory Services	LAB	0.00		33,512,15	3,611.90	37.124.05				37,124.05	
### Ambulatory Surgery (PBP)	AMS	0.00		0.00	0.00	0.00				0.00	
### Electrocardiography	EKG	0.00		3,227.33	347.80	3,575.13				3,575.13	
### Electroencephalography	EEG	0.00		1,734.89	187.00	1,921.89				1,921.89	
### Radiology-Diagnostic	RAD	0.00		11,568.24	1,246.80	12.815.04				12,815.04	10
### Radiology-Diagnostic	RAT	0.00		8,406.73	906.10	9,312.83				9,312,83	
## Nuclear Medicine	NUC	0.00		2,459.23	265.10	2.724.33				2,724.33	1
### CT Scanner	CAT	0.00		3,066.06	330.50	3,396.56				3,396.56	
### Interventional Radiology/Cardiovascular	IRC	0.00		8,660.28	933.40	9,593.68			+	9,593.68	7.
### Respiratory Therapy	RES	0.00		8,963.62	966.10	9,929.72		=		9,929.72	
### Pulmonary Function Testing	PUL	0.00		809.19	87.20	896.39			-	896.39	2
### Renal Dialysis	RDL	0.00		3,120.89	336.40	3,457.29			t	3,457.29	82
	PTH	0.00		4,548.48	490.20	5,038.68				5,038.68	1
## Physical Therapy Occupational Therapy	OTH	0.00		1,379.87	148.70	1,528.57				1,528.57	1
### Occupational Therapy ### Speech Language Pathology	STH	0.00		462.20	49.80	512.00				512.00	1
### Speech Language Pathology ### Organ Acquisition	OA	0.00		0.00	0.00	0.00				0.00	
### Ambulatory Surgery	AOR	0.00		0.00	0.00	0.00				0.00	
	LEU	0.00		0.00	0.00	0.00				0.00	
Leukopheresis	HYP	0.00		347.94	37.50	385.44				385.44	1,20
H## Hyperbaric Chamber	AUD	0.00		281.09	30.30	311.39				311.39	1,20
## Audiology ## Other Physical Medicine	OPM	0.00		0.00	0.00	0.00				0.00	
The Control of the Co	TNA	0.00		0.00	0.00	0.00				0.00	
## Transurethral Needle Ablation	MRI	0.00		1,407.75	151.70	1,559.45				1,559 45	
## Magnetic Resonance Imaging				0.00	0.00	0.00				0.00	
Oncology Clinic	OCL	0.00		0.00	0.00	0.00				0.00	
## Transurethral Microwave Thermotherapy	TMT	0.00			189.30	1,945.29				1,945.29	12
Admission Services	ADM			1,755.99						27,581.69	1,05
### Med/Surg Supplies	MSS	0.00		24,898.19	2,683.50	27,581.69 26,322.86				26,322.86	1,00
### Drugs Sold	CDS	0.00	211.60	23,761.86	2,561.00	20,322.86				20,322.80	1,00

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

INSTITUTION NUMBER: 0011

				DISTRIBUTE TO:		
			Physician	Data	General	
			Part B Centers	Processing	Service Centers	
	EXPENSES	TOTAL	Sch P2	Sch DP1	Sch C1 - C14	
Α	Dietary Services	1,695.50	0.0		1,695.5	Α
В	Laundry and Linen	2,206.70	0.0		2,206.7	В
С	Social Services	938.60	0.0		938.6	С
D	Purchasing and Stores	2,258.20	0.0		2,258.2	D
E	Plant Operations	11,521.90	0.0		11,521.9	E
F	Housekeeping	5,717.90	0.0		5,717.9	F
G	Central Services and Supply	2,542.00	0.0		2,542.0	G
Н	Pharmacy	4,900.60	0.0		4,900.6	Н
T	General Accounting	1,456.10	0.0		1,456.1	1
J	Patient Accounts	6,051.00	0.0		6,051.0	J
K	Hospital Administration	37,178.30	0.0		37,178.3	K
L	Medical Records	3,750.50	0.0		3,750.5	L
М	Medical Staff Administration	1,405.50	0.0		1,405.5	M
N	Nursing Administration	6,894.00	0.0		6,894.0	N
0	Organ Acquisition	0.00			0.0	0
Р	Data Processing	16,457.10	0.0	16,457.1		P
Q	Totals	104,973.90	0.0	16,457.1	88,516.8	Q

FSC1

INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR

6/30/2018

INSTITUTION NUMBER:

0011

BUDGET YEAR

1/0/1900

	VOLUME DATA	BASE YEAR UNITS	BUDGET YEAR UNITS						
A	VISITS	1,831	0		COL 1	COL 2	COL. 3	COL 4	
REI	E STANDING CLINIC SERVICES			SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES, REVENUES	EXPENSE REVENUE PER UNIT	
2011	BASE YEAR DATA			RECORDS	219.3	420.7	640.0	XXXXX	В
	BASE YEAR EXPENSES			SCH. OA	1.1	XXXXX	1.1	XXXXX	운
	ALLOCATION FROM CAFETERIA, PARKING, ET			IIIIII	XXXXXXX	XXXXX	xxxxx	XXXXX	D
	ALLOCATION FROM GENERAL SERVICE CENT	ERS	COL 6 CODE	111111	XXXXXXX	XXXXX	XXXXX	XXXXX	111
111	COST CENTER Col 5		DEP		XXXXX	0.3	0.3	XXXXX	DI
D2	Depreciation & Amortization	_	DEF		AVVVA	0.0	0.0	XXXXX	102
D3							0.0	XXXXX	D3
D4							0.0	XXXXX	D4
D5							0.0	XXXXX	D5
D6							0.0	XXXXX	D6
D7							0.0	XXXXX	D7
DB				-			0.0	XXXXX	D8
D9							0.0	XXXXX	D9
010							0.0	XXXXX	Die
211							0.0	XXXXX	D11
212							0.0	XXXXX	D12
213							0.0	XXXXX	D13
014							0.0	XXXXX	D14
215							0.0	XXXXX	D15
	Capital Facilities Allowance			Records		0.0	0.0	XXXXX	E
	Base Year Adjusted Expenses			B+C+D+E	220.4	421.0	641.4	0.3503	F
	BASE YEAR PROFIT (LOSS)								
G	BASE YEAR REVENUE			RECORDS	XXXXXXX	XXXXX	506.6	XXXXX	G
	PROFIT (LOSS)			G-F	XXXXXXXX	XXXXX	(134.8)	XXXXX	H
	BUDGET YEAR DATA								
1	INFLATION			HSCRC				XXXXX	1
	MISCELLANEOUS			BUDGET				XXXXX	Ĵ
	BUDGET YEAR EXPENSES		-	F+I+J				XXXXX	K
				A					
	BUDGET YEAR PROFIT (LOSS) BASE YEAR REVENUE			RECORDS	XXXXXXXX	XXXXX		XXXXX	TL
	ADJUSTMENTS			BUDGET	XXXXXXXX	XXXXX		XXXXX	M
	BUDGET YEAR REVENUE			L + M	XXXXXXX	XXXXX		XXXXX	N
	PROFIT (LOSS)			N-K	XXXXXXX	XXXXX		XXXXX	Ö
	- A								
P	FTE DATA BASE YEAR HOURS WORKED / 2080			RECORDS	1.8				Р

BASE YEAR 6/30/2018 INSTITUTION NAME: Saint Agnes Hospital BUDGET YEAR 1/0/1900 INSTITUTION NUMBER: 0011

BASE YEAR BUDGET YEAR VOLUME DATA UNITS UNITS COL. 1 COL 2 COL 3 COL 4 CAP 1982 ed. 231.312 0 LABORATORY -NON PATIENT WAGES, SALARIES TOTAL EXPENSE EXPENSES, SOURCE & FRINGE OTHER REVENUE BASE YEAR DATA

8 BASE YEAR EXPENSES
C ALLOCATION FROM CAFETERIA, PARKING, ETC.
D ALLOCATION FROM GENERAL SERVICE CENTERS
III Copreciation & Amortization
O2 Leases & Rentals
D3
D4
D5
D6
D7
D8
D9
D10
D9
D10
D11 BENEFITS EXPENSES REVENUES 469 3 XXXXX B
10.6 XXXXX D
XXXXX D
XXXXXX D
XXXXX D
XXXXX D
1.4 XXXXX D
2.0 XXXXX D
0.0 XXXXX D RECORDS SCH. OA 2,470 9 XXXXX 3,469 3 10.6 10.6 XXXXXXX XXXXXXX XXXXXXX XXXXX COL 6 CODE 111111 42.9 0.0 XXXXX 0.0 XXXXX D12
D13
D14
D15
D15
E Capital Facilities Allowance
F Base Year Adjusted Expenses 0.0 XXXXX D12 0.0 XXXXX D13 0.0 XXXXX D14 0.0 XXXXX D15 0.0 XXXXX E 24.2 0.0152 F 0.0 2,515.2 Records 0.0 3,524.2 1,009.0 B+C+D+E BASE YEAR PROFIT (LOSS) RECORDS G - F 4,178.6 XXXXX G 654.4 XXXXX H G BASE YEAR REVENUE H PROFIT (LOSS) **BUDGET YEAR DATA** XXXXXX I I INFLATION

J MISCELLANEOUS

K BUDGET YEAR EXPENSES HSCRC BUDGET F+I+J BUDGET YEAR PROFIT (LOSS) L BASE YEAR REVENUE
M ADJUSTMENTS
N BUDGET YEAR REVENUE
O PROFIT (LOSS) RECORDS XXXXXX XXXXX XXXXXX L

FTE DATA		
P BASE YEAR HOURS WORKED / 2080	RECORDS 18.2	P
Q BUDGET YEAR HOURS WORKED / 2080	BUDGET	Q

BUDGET L+M N-K

XXXXXXX XXXXXXX XXXXXXX

XXXXXX N

 INSTITUTION NAME:
 Saint Agnes Hospital
 BASE YEAR
 6/30/2018

 INSTITUTION NUMBER:
 0011
 BUDGET YEAR
 1/0/1900

	INSTITUTION NUMBER: 0011				ŀ	BUDGET YEAR		1/0/1900	
	VOLUME	BASE VEAR	BUDGET YEAR	1					
	DATA	UNITS	UNITS						
+	DAIN	0.11.0							
	NO. OF FTEs	471.5	471.5	J	COL. 1	COL, 2	COL; 3	COL, 4	
IYS	ICIANS PART B SERVICES				WAGES, SALARIES		TOTAL	EXPENSE	
				SOURCE	& FRINGE	OTHER	EXPENSES,	REVENUE	
					BENEFITS	EXPENSES	REVENUES	PER UNIT	J
	BASE YEAR DATA			RECORDS	83.044.3	14,324.1	97.368.4	XXXXX	Ti
	BASE YEAR EXPENSES ALLOCATION FROM CAFETERIA, PARKING, ETC.			SCH. OA	274.9	XXXXX	274.9	XXXXX	1
	ALLOCATION FROM GENERAL SERVICE CENTER:	5		unu	XXXXXXX	XXXXX	XXXXX	XXXXX	1
7	COST CENTER Col 5		COL. 6 CODE	mm	XXXXXXX	XXXXX	XXXXX	XXXXX	11
	Degreciation & Amortization		DEP		XXXXX	1,378.4	1,378.4	XXXXX	D
	Leases & Rentals		LEA		XXXXX	4,295.1	4 295.1	XXXXX	D
3			102.011		02.00		0.0	XXXXX	C
4							0.0	XXXXX	E
5 [0.0	XXXXXX	C
6							0.0	XXXXX	D
7 [0.0	XXXXX	C
В	i						0.0	XXXXX	0
9 ļ							0.0	XXXXX	b
ol				-			0.0	XXXXX	10
11		_	-	-			0.0	XXXXX	10
12							0.0	XXXXX	D
13							0.0	XXXXX	D
14		_		-			0.0	XXXXX	D
	Capital Facilities Allowance		1	Records		0.0	0.0	XXXXX	E
	Base Year Adjusted Expenses			B+C+D+E	83,319.2	19 997 6	103,316 8	219 1237	
	BASE YEAR PROFIT (LOSS)		4	10.0.0.0	05,015.0				- Barrer
	BASE YEAR REVENUE		1	RECORDS	XXXXXXX	XXXXX	64,569.6	XXXXX	10
	PROFIT (LOSS)			G-F	XXXXXXX	XXXXX	(38,747.2)	XXXXX	1
_	DUDGET VEAD DATA								
	BUDGET YEAR DATA INFLATION			HSCRC				XXXXX	T
	MISCELLANEOUS		-	BUDGET				XXXXX	1.
	BUDGET YEAR EXPENSES			F+I+J					1
_				1					-
-	BUDGET YEAR PROFIT (LOSS)		T	RECORDS	XXXXXXXX	XXXXX		XXXXX	T
	BASE YEAR REVENUE			BUDGET	XXXXXXX	XXXXX		XXXXX	1
	ADJUSTMENTS BUDGET YEAR REVENUE		+	L+M	XXXXXXXX	XXXXX		XXXXX	Ti
	PROFIT (LOSS)			N-K	XXXXXXXX	XXXXX		XXXXX	1
-									
	FTE DATA								-
5 1	BASE YEAR HOURS WORKED / 2080			RECORDS	471.5				F

UNREGULATED SERVICES UPB - Detail

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

INSTITUTION NUMBER: 0011

(5) (6) (7) (8) (2) (3) (4) (1) Wages, Salaries & Hospital Fringe Other Total MEDICARE PROVIDER/SUPPLIER TYPE DESCRIPTION FTEs Expenses Based Code Benefits Expenses Revenue HOSPITALIST XX 252,10 191.03 443,13 217.15 0.12 GENERAL PRACTICE 1 10400,04 5203.84 38.59 8747.40 1652,64 2 GENERAL SURGERY 1935.79 12.10 1993.60 827 91 2821 51 4 OTOLARYNGOLOGY 13.81 ANESTHESIOLOGY 4992,30 232.82 5225.12 3092.73 Yes 5 9107.80 1979.18 11086.98 7878.87 46.18 6 CARDIOLOGY 7 DERMATOLOGY 15688 60 6324.98 22013.58 15920.11 141.29 8 FAMILY PRACTICE INTERVENTIONAL PAIN MANAGEMENT 9 GASTROENTEROLOGY 119.40 0,18 119,58 0.00 0.86 10 6424.19 282,36 6706.55 4182.97 Yes 23,47 11 INTERNAL MEDICINE 12 OSTEOPATHIC MANIPULATIVE MEDICINE 438.78 2039.78 1242.72 7.53 1601.00 13 NEUROLOGY NEUROSURGERY 14 **OBSTETRICS & GYNECOLOGY** 9828.60 1921.05 11749,65 6333.79 61.41 16 16 **OBSTETRICS & GYNECOLOGY** 0.00 0.00 0.00 0.00 Yes 17 HOSPICE & PALLIATIVE CARE 0.00 OPHTHALMOLOGY 18 ORAL SURGERY 19 2,57 664.30 129.90 794.20 660.03 20 ORTHOPEDIC SURGERY Yes 0.00 22 PATHOLOGY 0.00 0.00 0.00 45.15 SPORTS MEDICINE 23 2776.60 1446,17 4222.77 2865.68 12,80 PLASTIC & RECONSTRUCTIVE SURGERY 24 PHYSICAL MEDICINE & REHABILITATION 25 92.71 2.80 427.10 13,61 440.71 Yes 26 **PSYCHIATRY** 11.09 PULMONARY DISEASE 1745.90 338.35 2084.25 1153.18 29 3942.99 86,10 4029,09 3573.64 Yes 14.30 DIAGNOSTIC RADIOLOGY 30 1057.55 227.52 1285.07 328.55 4.14 33 THORACIC SURGERY 0.00 0.00 0.00 0.00 0.00 34 UROLOGY PEDIATRIC MEDICINE 3187.49 182.55 3370.04 2372 95 Yes 14.82 37 184.32 10.67 194,99 71,53 0.89 GERIATRIC MEDICINE Yes 38 0.00 0.00 0.00 0.00 0.00 39 NEPHROLOGY 40 HAND SURGERY 0.00 0.11 41.22 0.00 41.22 INFECTIOUS DISEASE 44 680.81 94.40 775.21 697.00 Yes 5.79 46 **ENDOCRINOLOGY** PODIATRY 48 10.10 0.00 10.10 0.00 0.07 66 RHEUMATOLOGY 352.56 2.84 534.34 PAIN MANAGEMENT 516.01 18:33 72 1915.37 536,17 2451.53 1307.54 13.07 77 VASCULAR SURGERY 0.00 0.00 0.00 0.00 0.00 78 CARDIAC SURGERY 0.00 0.00 0.00 0.00 0.00 79 ADDICTION MEDICINE 2712.56 1771.06 6.85 2610.49 102.07 Yes 81 CRITICAL CARE MEDICINE 82 HEMATOLOGY 83 HEMATOLOGY - ONCOLOGY PREVENTIVE MEDICINE В4 85 MAXILLOFACIAL SURGERY 86 NEUROPSYCHIATRY MEDICAL ONCOLOGY 2838.29 2993.10 5831,39 3270.05 Yes 18.79 90 91 SURGICAL ONCOLOGY 55 65 12.54 68.19 0.00 Yes 1,46 92 RADIATION ONCOLOGY EMERGENCY MEDICINE 1777.92 0.00 1777,92 0.00 Yes 12.84 93 INTERVENTIONAL RADIOLOGY 94 0.00 0.90 132.12 -44.78 87.34 98 GYNECOLOGICAL ONCOLOGY СЗ INTERVENTIONAL CARDIOLOGY SLEEP MEDICINE co 0.00 OTHER (Unregulated Lab) ZZ 19,997.63 103,316.84 64,569,61 471.50 83,319.21

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INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR

6/30/2018

INSTITUTION NUMBER:

0011

BUDGET YEAR

1/0/1900

	VOLUME DATA	BASE YEAR UNITS	BUDGET YEAR UNITS						
_	DAIA	ONTO	CINITO	1					
A	CNA Minutes	0	0]	COL, 1	COL 2	COL 3	COL, 4	
FR	TIFIED NURSE ANESTHETIST				WAGES, SALARIES		TOTAL	EXPENSE	7
	THE TOTAL ATENTION			SOURCE	& FRINGE	OTHER	EXPENSES,	REVENUE	П
					BENEFITS	EXPENSES	REVENUES	PER UNIT	
	BASE YEAR DATA								-
В	BASE YEAR EXPENSES			RECORDS	4,299.8	170.7	4,470.5	XXXXX	Τ
	ALLOCATION FROM CAFETERIA, PARKING, ETC.			SCH OA	9.0	XXXXX	9.0	XXXXX	Τ
	ALLOCATION FROM GENERAL SERVICE CENTERS			IIIII	XXXXXXXX	XXXXX	XXXXX	XXXXX	Ι
m	COST CENTER Col 5		COL 6 CODE	IIIII	XXXXXXX	XXXXX	XXXXX	XXXXX	Ι
01						344346534	0.0	XXXXX	Ι
22							0.0	XXXXX	Ţ
23							0.0	XXXXX	1
34							0.0	XXXXX	1
)5							0.0	XXXXX	I
06							0.0	XXXXX	I
27							0.0	XXXXX	Į
38							0.0	XXXXX	I
29							0.0	XXXXX	Ţ
10							0.0	XXXXX	
11							0.0	XXXXX	1
112							0.0	XXXXX	1
113							0.0	XXXXX	1
14							0.0	XXXXX	1
115							0.0	XXXXX	1
	Capital Facilities Allowance			Records		0.0	0.0	XXXXX	Ţ
F	Base Year Adjusted Expenses			B+C+D+E	4,308 B	170.7	4,479.5	0.0000	1
	BASE YEAR PROFIT (LOSS)							Monne	+
	BASE YEAR REVENUE			RECORDS	XXXXXXX	XXXXX	2,535.4	XXXXX	+
н	PROFIT (LOSS)			G-F	XXXXXXXX	XXXXX	(1,944.1)	XXXXX	L
	BUDGET YEAR DATA			******					_
	INFLATION			HSCRC				XXXXX	+
	MISCELLANEOUS			BUDGET				XXXXX	+
K	BUDGET YEAR EXPENSES	.1	1	F+I+J					_
	BUDGET YEAR PROFIT (LOSS)		-	V				Vuunu	+
	BASE YEAR REVENUE			RECORDS	XXXXXXXX	XXXXX		XXXXX	+
	ADJUSTMENTS	_		BUDGET	XXXXXXX	XXXXX		XXXXX	+
	BUDGET YEAR REVENUE			L+M	XXXXXXX			XXXXX	+
0	PROFIT (LOSS)		l	N-K	XXXXXXXX	XXXXX		*****	1
	FTE DATA			Inconno					r
	BASE YEAR HOURS WORKED / 2080			RECORDS	15.4				F
ο.	BUDGET YEAR HOURS WORKED / 2080			BUDGET					ŧ,

P

 INSTITUTION NAME:
 Saint Agnes Hospital
 BASE YEAR
 6/30/2018

 INSTITUTION NUMBER:
 0011
 BUDGET YEAR
 1/0/1900

	VOLUME DATA	BASE YEAR UNITS	BUDGET YEAR UNITS						
A	NUMBER OF FTES	70	0]	COL. 1	COL 2	COL; 3	COL. 4	
	SICIAN SUPPORT SERVICES			SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES, REVENUES	EXPENSE REVENUE PER UNIT	
	BASE YEAR DATA			RECORDS	10,654,9	0.0	10.654.9	XXXXX	В
	BASE YEAR EXPENSES			SCH. OA	40.6	XXXXX	40.6	XXXXX	C
	ALLOCATION FROM CAFETERIA, PARKING, ETC. ALLOCATION FROM GENERAL SERVICE CENTERS			IIIIII	XXXXXXX	XXXXXX	XXXXXX	XXXXX	D
D	COST CENTER Col 5		COL 6 CODE	IIIII	XXXXXXX	XXXXX	XXXXX	XXXXX	111
D1	COST CENTER COLD		COL. O CODE	, mini	AAAAAAA	70000	0.0	XXXXX	D
D2							0.0	XXXXX	D
D3							0.0	XXXXX	D
D4							0.0	XXXXX	D4
D5							0.0	XXXXX	DS
D6							0.0	XXXXX	DE
D7							0.0	XXXXX	D
DB							0.0	XXXXX	DE
D9							0.0	XXXXX	D9
D10							0.0	XXXXX	D1
D11							0.0	XXXXX	DI
D12							0.0	XXXXX	D1
013							0.0	XXXXX	DI
014							0.0	XXXXX	DI
D15							0.0	XXXXX	DI
E	Capital Facilities Allowance			Records				XXXXX	E
F	Base Year Adjusted Expenses			B+C+D+E	10,695.5	0.0	10,695 5	153,7973	F
	BASE YEAR PROFIT (LOSS)			***************************************			1572371757		-
	BASE YEAR REVENUE			RECORDS		XXXXX	3,991.6	XXXXX	G
Н	PROFIT (LOSS)			G-F	XXXXXXX	XXXXX	(6,703.8)	XXXXX	H
	BUDGET YEAR DATA								
	INFLATION			HSCRC				XXXXX	1
	MISCELLANEOUS			BUDGET				XXXXX	J
K	BUDGET YEAR EXPENSES			F+I+J					K
	BUDGET YEAR PROFIT (LOSS)								
	BASE YEAR REVENUE			RECORDS		XXXXX		XXXXX	L.
	ADJUSTMENTS			BUDGET	XXXXXXX	XXXXX		XXXXX	M
	BUDGET YEAR REVENUE			L+M N-K	XXXXXXX	XXXXX		XXXXX	N
	PROFIT (LOSS)	1.			XXXXXXX	XXXXX			

P BASE YEAR HOURS WORKED / 2080
Q BUDGET YEAR HOURS WORKED / 2080

TBA3 UR 9

BASE YEAR

6/30/2018

INSTITUTION NUMBER: 0011 BUDGET YEAR 1/0/1900

Saint Agnes Hospital

INSTITUTION NAME:

	VOLUME DATA	BASE YEAR UNITS	BUDGET YEAR UNITS						
A	VISITS	57,991	0	J	COL. 1	COL 2	COL 3	COL 4	
ET	ON IMAGING				WAGES, SALARIES		TOTAL	EXPENSE	٦
				SOURCE	& FRINGE	OTHER	EXPENSES,	REVENUE	
					BENEFITS	EXPENSES	REVENUES	PER UNIT	J
-	BASE YEAR DATA			Innamma		revers I	2.000.0	unner	-
	BASE YEAR EXPENSES			RECORDS	5,140.4 25.3	949.4	6,089.8	XXXXX	4
	ALLOCATION FROM CAFETERIA, PARKING, ETC. ALLOCATION FROM GENERAL SERVICE CENTERS			SCH. OA	XXXXXXXX	XXXXX	25.3 XXXXX	XXXXX	+
111	COST CENTER Col 5		COL 6 CODE	111111	XXXXXXXX	XXXXX	XXXXX	XXXXX	+
	Depreciation & Amortization		DEP		XXXXX	360.8	360.8	XXXXX	+
	Leases & Rentals		LEA		XXXXX	457.1	457.1	XXXXX	Ť
23	Leases & Nelliais		1		70000		0.0	XXXXX	1
D4							0.0	XXXXX	1
05							0.0	XXXXX	1
06							0.0	XXXXX	1
37							0.0	XXXXX	
28							0.0	XXXXX	
D9							0.0	XXXXX	
10							0.0	XXXXX	4
211							0.0	XXXXX	4
112							0.0	XXXXX	1
213				_			0.0	XXXXX	4
114				_			0.0	XXXXX	-
15	Capital Facilities Allowance			Records			0.0	XXXXX	4
	Base Year Adjusted Expenses			B+C+D+E	5,165.7	1,767.3	6,933.0	0.1196	+
				IBTOTATE	3,103,7	1,707.3	0,033,0	0,1150	1
G	BASE YEAR PROFIT (LOSS) BASE YEAR REVENUE			RECORDS	XXXXXXXX	xxxxx	7,145.9	XXXXX	1
н	PROFIT (LOSS)	y i		G-F	XXXXXXXX	XXXXX	212.9	XXXXX	I
	BUDGET YEAR DATA					. 17222-102-102			
1	INFLATION			HSCRC				XXXXX	T
	MISCELLANEOUS			BUDGET				XXXXXX	†
	BUDGET YEAR EXPENSES			F+I+J				700001	Ť
L	BUDGET YEAR PROFIT (LOSS) BASE YEAR REVENUE			RECORDS	XXXXXXXX	XXXXX		XXXXX	Т
	ADJUSTMENTS			BUDGET	XXXXXXXX	XXXXX		XXXXX	Ť
	BUDGET YEAR REVENUE			L+M	XXXXXXX	XXXXX		XXXXX	1
	PROFIT (LOSS)			N-K	XXXXXXX	XXXXX		XXXXX	1
	7507300, 6,730								-
р	FTE DATA BASE YEAR HOURS WORKED / 2080			RECORDS	43.4				Г
	BUDGET YEAR HOURS WORKED / 2080			1110001100	70.7				41

INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR

6/30/2018

INSTITUTION NUMBER:

0011

BUDGET YEAR

1/0/1900

	VOLUME DATA	BASE YEAR UNITS	BUDGET YEAR UNITS						
A	TREATMENTS	0	0	J	COL. 1	COL. 2	COL. 3	COL 4	
LL	OTHER				WAGES, SALARIES		TOTAL	EXPENSE	1
	enteliit ili verimotelii			SOURCE	& FRINGE BENEFITS	OTHER EXPENSES	EXPENSES, REVENUES	REVENUE PER UNIT	
0	BASE YEAR DATA BASE YEAR EXPENSES			RECORDS	197.5	29.3	226.8	XXXXX	Т
	ALLOCATION FROM CAFETERIA, PARKING, ETC.			SCH. OA	1.0	XXXXX	1.0	XXXXX	+
	ALLOCATION FROM CAPETERIA, PARKING, ETC.			111111	XXXXXXX	XXXXX	XXXXX	XXXXX	t
III	COST CENTER Col 5		COL 6 CODE	mm	XXXXXXX	XXXXX	XXXXX	XXXXX	+
01	COST CENTER COTO		OOL O'COLL		70000001	70000	0.0	XXXXX	t
02							0.0	XXXXX	1
23							0.0	XXXXX	Ť
)4							0.0	XXXXX	T
25							0.0	XXXXX	Т
26							0.0	XXXXX	T
07							0.0	XXXXX	
80							0.0	XXXXX	T
9							0.0	XXXXX	T
10							0.0	XXXXX	1
11							0.0	XXXXX	U
112							0.0	XXXXX	1
13							0.0	XXXXX	
14							0.0	XXXXX	
15							0.0	XXXXX	1
	Capital Facilities Allowance			Records				XXXXX	1
F	Base Year Adjusted Expenses	1		B+C+D+E	198,5	29 3	227.8	0.0000	
	BASE YEAR PROFIT (LOSS)			72002222				No. West	_
	BASE YEAR REVENUE			RECORDS		XXXXX	648.4	XXXXX	+
н_	PROFIT (LOSS)			G-F	XXXXXXX	XXXXX	420.6	XXXXX	1
	BUDGET YEAR DATA			IHSCRC				XXXXX	т
	INFLATION		_	BUDGET				XXXXX	+
	MISCELLANEOUS BUDGET YEAR EXPENSES			[F+I+J					İ
	BUDGET YEAR PROFIT (LOSS)								
1	BASE YEAR REVENUE			RECORDS	XXXXXXX	XXXXX		XXXXX	T
	ADJUSTMENTS			BUDGET	XXXXXXXX	XXXXX		XXXXX	T
	BUDGET YEAR REVENUE			L+M	XXXXXXXX	XXXXX		XXXXX	T
	PROFIT (LOSS)			N-K	XXXXXXX	XXXXX		XXXXX	I
	FTE DATA								_
P	BASE YEAR HOURS WORKED / 2080			RECORDS	1.7				F
^	BUDGET YEAR HOURS WORKED / 2080			BUDGET					ſ

 INSTITUTION NAME:
 Saint Agnes Hospital
 BASE YEAR
 6/30/2018

 INSTITUTION NUMBER:
 0011
 BUDGET YEAR
 1/0/1900

	VOLUME DATA	BASE YEAR UNITS	BUDGET YEAR UNITS						
A	SURGERIES	902	0	j	COL, 1	COL, 2	COL, 3	COL, 4	
sc					WAGES, SALARIES	ATUED	TOTAL	EXPENSE	
				SOURCE	& FRINGE BENEFITS	OTHER EXPENSES	EXPENSES, REVENUES	PER UNIT	
	BASE YEAR DATA			RECORDS	682.4	351.3	1.033.7	XXXXX	В
	BASE YEAR EXPENSES			SCH. OA	4.1	XXXXX	4.1	XXXXX	10
C	ALLOCATION FROM CAFETERIA, PARKING, ET ALLOCATION FROM GENERAL SERVICE CENTI	500		IIIII	XXXXXXX	XXXXX	XXXXX	XXXXX	0
	COST CENTER Col 5	EKS	COL 6 CODE	IIIII	XXXXXXXX	XXXXX	XXXXX	XXXXX	11/
111	Decreciation & Amortization		DEP	min	XXXXX	24.1	24.1	XXXXX	D
	Leases & Rentals		LEA		XXXXX	114.5	114.5	XXXXX	TD
	Leases & Remais		LEA		70000		0.0	XXXXX	D
D3							0.0	XXXXX	Tō
05							0.0	XXXXX	D
D6							0.0	XXXXX	D
D7							0.0	XXXXX	D
D8							0.0	XXXXX	D
D9				10.			0.0	XXXXX	To
010							0.0	XXXXX	D
211							0.0	XXXXX	DI
012							0.0	XXXXX	DI
013							0.0	XXXXX	DI
014							0.0	XXXXX	DI
015							0.0	XXXXX	D1
	Capital Facilities Allowance			Records				XXXXX	E
	Base Year Adjusted Expenses			B+C+D+E	686.5	489 9	1,176.4	1.3042	F
	BASE YEAR PROFIT (LOSS)								
G	BASE YEAR REVENUE			RECORDS	XXXXXXX	XXXXX	1,140.9	XXXXX	0
	PROFIT (LOSS)			G-F	XXXXXXX	XXXXX	(35.5)	XXXXX	H
	BUDGET YEAR DATA								
1	INFLATION		T	IHSCRC				XXXXX	
J	MISCELLANEOUS			BUDGET				XXXXX	L
K	BUDGET YEAR EXPENSES			[F+I+J					K
	BUDGET YEAR PROFIT (LOSS)								_
L.	BASE YEAR REVENUE			RECORDS		XXXXX		XXXXXX	1
	ADJUSTMENTS			BUDGET	XXXXXXX	XXXXX		XXXXX	I N
	BUDGET YEAR REVENUE			L + M	XXXXXXX	XXXXX		XXXXX	1
0	PROFIT (LOSS)			N-K	XXXXXXXX	XXXXX		XXXXX	
	FTE DATA			Tananana					
	BASE YEAR HOURS WORKED / 2080			RECORDS	7.0				P
	BUDGET YEAR HOURS WORKED / 2080			BUDGET					

INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR

6/30/2018

INSTITUTION NUMBER: 0011

8	Schedule	Entity Name and Address	Nature of Service
UR-1		BMS/St. Agnes Community Care Center 900 S. Caton Avenue Baltimore, MD 21229	FREE STANDING CLINIC SERVICES
UR-2			PRIVATE HOME SERVICES
UR-3			OUTPATIENT RENAL DIALYSIS
UR-4			SKILLED NURSING CARE
UR-5		Laboratory Outreach	LAB NON-PATIENT
UR-6		Various	PART B PHYSICIANS
UR-7			CERTIFIED NURSE ANESTHETISTS
UR-8			PHYSICIAN SUPPORT SERVICES
UR-9		Seton Imaging	SETON IMAGING
UK-9		Section Integral 3449 Wilkens Avenue Baltimore, MD 21229	SEIGH MARCING
UR-10		HADP, CORF, Diab 900 S. Caton Avenue Baltimore, MD 21229	ALL OTHER
UR-11		MD Surgeons Center of Columbia	ASC
UR-12			
UR-13			
UR-14			
UR-15			

ANNUAL COST SURVEY

INSTITUTION NAME

Saint Agnes Hospital BASE YEAR

6/30/2018

INSTITUTION NUMBER 0011

COL 1

COL 2

	CATEGORY	COSTS	PERCENT
Α	Salaries & Wages	117,003.74	36.72%
В	Fringe Benefits	32,789.96	10.29%
С	Depreciation & Amortization	18,048.45	5.66%
C1	Operating Leases	2,606.89	0.82%
D	Interest Expense	2,704.78	0.85%
E	Medical & Surgical Supplies	25,613.72	8.04%
F	IV Solutions and Pharmacy	20,643.21	6.48%
G	Laundry, Linen, Uniforms	1,432.14	0.45%
H	Films & Solutions	2,082.61	0.65%
1	Blood, Plamanate, Albumen	1,528.53	0.48%
J	Contracted Services	28,303.20	8.88%
K	Professional Fees	1,529.89	0.48%
L	Agency Nurses	3,461.91	1.09%
M	Malpractice Insurance	1,754.18	0.55%
N	All Other Insurance	6,943.77	2.18%
0	Telephone	0.00	0.00%
Р	Utilities & Water	1,648.51	0.52%
Q	Food	65.06	0.02%
R	Printing, Office Supplies, Copying	957.10	0.30%
S	Chemical, Solutions, Lubrication,	100.95	0.03%
T	Other (Detail over 20% of supply	49,396.23	15.50%
U	Total	318,614.83	100.00%

TRANSACTIONS WITH RELATED ENTITIES

INSTITUTION NAME:

Saint Agnes Hospital

BASE YEAR

6/30/2018

INSTITUTION NUMBER:

0011

COL 1

COL 2

COL 3

COL 4

COL 5

COL 6

	RELATED	VALUE OF ASSET OR SERVICE	VALUE OF ASSET OR SERVICE	CATEGORY	DESCRIPTION
No.	ENTITY	PROVIDED TO THE HOSPITAL	PROVIDED BY THE HOSPITAL	CODE	OF TRANSACTION
-	TAi I-fti Ca-i	22 225 255 20		B&D	Information Technology Convince
1	Ascension Information Services	23,335,355.00			Information Technology Services
2	MedExcel	5,767,407.00			Plant Operations & Maintenance Services
3	Ministry Service Center	1,020,869.00		B&D	General Accounting & Business Office Function
4	The Resource Group	1,140,114.00		B&D	Purchasing & Supply Chain Services
5	Trimedx			B&D	Biomedical Engineering Services
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					

SUPPLEMENTAL BIRTHS SCHEDULE

INSTITUTION NAME: Saint Agnes Hospital BASE YEAR 6/30/2018

INSTITUTION NUMBER: 0011

Adn	nissions for EIPA Counts	
Α	Neonates not charged an Admission Charge	252
В	Admissions from monthly reports ADM revenue center	15,040
С	Total	15,292
Cas	es for Charge Per Case (CPC) Calculations	
D	Neonates not charged an Admission Charge	252
Ε	Births from monthly reports Nursery (NUR) revenue center	1,918
F	Sub-Total	2,170
G	Admissions from monthly reports ADM revenue center	15,040
Н	Total	17,210

FY2018 SUPPLEMENTAL SCHEDULE - I **Summary of Other and Non-Operating Revenue**

Saint Agnes Hospital 0011 Hospital Name:

Hospital Number:

Other Operating Revenue:	2018	HSCRC Schedule
Release of gifts funds Grants/Federal Financial Awards Investments Other	1,981.3	G / GR G / GR G / GR G / GR
Total - RE Col 1, Line L	1,981.3	

Non-Operating and Net Unregulated Revenue:		
Office & Other Rental	48.0	
Retail Operations	430.1	
Patients Telephones	47.0	
Cafeteria	1,720.2	E 7
Day Care	17.8	
Housing	ä	E 9
Research	-	F 1
Nursing Education	₩.	F 2
Other Health Profession Education	-	F 3
Community Health Education	÷	F 4
Freestanding Clinic Services	506.6	UR 1
Private Home Services	=	UR 2
Outpatient Renal Dialysis	2	UR 3
Skilled Nursing Care	-	UR 4
Laboratory Non-Patient	4,178.6	UR 5
Physicians Part B Services	64,569.6	UR 6
Certified Nurse Anesthetists	2,535.4	UR 7
Physician Support Services	3,991.6	UR 8
Freestanding Imaging Services	7,145.9	UR 9
All Other UR	648.4	UR 10
Ambulatory Surgery Center	1,140.9	UR 11
0	<u>=</u>	UR 12
0	-	UR 13
0	-	UR 14
0	¥	UR 15
Investment Income	1,880.0	G/GR
Other		G / GR
	· · · · · · · · · · · · · · · · · · ·	
Total - RE Col 2, Line M + Line U	88,860.2	

Office & Other Rental	473.3	E 4
Retail Operations	389.8	E 5
Patients Telephones	254.1	E 6
Cafeteria	1,720	E 7
Day Care	18	E 8
Freestanding Clinic Services	641.4	UR 1
Laboratory Non-Patient	3,524.2	UR 5
Physicians Part B Services	103,316.8	UR 6
Certified Nurse Anesthetists	4,479.5	UR 7
Physician Support Services	10,695.5	UR 8
Freestanding Imaging Services	6,933.0	UR 9
All Other UR	227.8	UR 10
Ambulatory Surgery Center	1,176.4	UR 11
Non-Operating Expense	2,422_	G/GR
Total - RE Col 2, Line S + Line V	136,271.7	

FY2018 SUPPLEMENTAL SCHEDULE - II

Supplement to FS & RE Schedules to Disclose Non-Operating Revenue and Expense

Hospital Name: Saint Agnes Hospital

Hospital Number: 0011

Income Statement

RE Line T	Excess (Deficit) Operating Rev. over Operating Expenses	XXXXX	\$6,283.88
RE Line U	Detailed Non-Operating:- Income/(Expense)		
U1	Contributions (Unrestricted)		XXXXX
U2	Interest & Investment Income	243.4	XXXXX
U3	Investment - Gains/(Losses) - Realized	1,060.2	XXXXX
U4	Investment - Gains/(Losses) - Unrealized	576.7	XXXXX
U5	Swap Agreements - Gains/(Losses) - Realized		XXXXX
V	Other (Specify)	-\$2,422.29	XXXXX
V	Loss on extinguishment of debt		XXXXX
V	Other non-operating income		XXXXX
RE Line W	Excess Profit/(Loss)	XXXXX	5,741.8

Supplemental Schedule - FS and RE Schedules

Other Significant Financial Information

	Swap Agreements - Gains/(Losses) - Unrealized		XXXXX
DD	Collateral Received/(Posted) - Swap Agreements		XXXXX
EE	Retirement of Debt - Gains/(Losses)		XXXXX
FF	Pension Adjustment - Defined Benefit Plans		XXXXX
GG	Other (Specify)		XXXXX
HH	Total	XXXXX	\$0.00

SUPPLEMENTAL SCHEDULE - III

Reconciliation of Depreciation and Lease / Rentals

Hospital Name: Saint Agnes Hospital

Hospital Number: 0011

Fiscal Year 2018

		Leases /	
	Depreciation	Rentals	Total
UA Schedule - Line A	\$20,176.80	\$7,516.50	\$27,693.30
Allocation of E & UR Sched	ules:		
E1	\$0.00	\$0.00	\$0.00
E 2	\$0.00	\$0.00	\$0.00
E 3	\$0.00	\$0.00	\$0.00
E 4	\$364.70	\$0.00	\$364.70
UR 5	\$1.39	\$42.88	\$44.27
UR 6	\$1,378.35	\$4,295.14	\$5,673.49
UR 7	\$0.00	\$0.00	\$0.00
UR 8	\$0.00	\$0.00	\$0.00
UR 9	\$360.81	\$457.13	\$817.94
UR 10	\$0.00	\$0.00	\$0.00
UR 11	\$24.15	\$114.45	\$138.60
UR 12	\$0.00	\$0.00	\$0.00
UR 13	\$0.00	\$0.00	\$0.00
UR 14	\$0.00	\$0.00	\$0.00
UR 15	\$0.00	\$0.00	\$0.00
RE Schedule - Line Q	\$18,047.06	\$2,606.90	\$20,653.96

\$20,655.54

SUPPLEMENTAL SCHEDULE - IV

Reconciling the amount of uncompensated care per the hospital's audited financial statements and trial balance

Hospital Name: Saint Agnes Hospital

Hospital Number: 0011

Fiscal Year 2018

Audited Financial Statements:	
Bad Debts	\$4,875.58
Charity Care	\$23,954.88
Uncompensated Care per Statement	\$28,830.46

Trial Balance:	
Bad Debt Write-offs	\$10,067.89
Charity Write-offs	\$23,115.34
Change in Balance Sheet Reserve	-\$3,021.17
Bad Debt Recoveries	-\$1,700.11
Credit and Collection Expense	\$368.50
Uncompensated Care per Trial Balance	\$28,830.46

Annual Report of Revenues, Expenses, and Volumes:	
Uncompensated Care - Schedule PDA	\$22,058.47
Unregulated Charity & Bad Debts	\$6,403.49
Credit and Collection Expense	\$368.50
Uncompensated Care Per Report	\$28,830.46

FY 2018 SUPPLEMENTAL SCHEDULE - V

Detail of MCO Revenue (in 000's)

Hospital Name: Hospital Number:

Fiscal Year 2018

Saint Agnes Hospital 0011

Payor	Inpatient	Outpatient	Total
AETNA	992.1	1,364.8	2,356.9
AMERIGROUP	7,813.3	8,907.8	16,721.1
CARE IMPROVEMENT PLUS	2.6	11.4	14.0
CIGNA HEALTHSPRING	4,107.3	2,551.1	6,658.4
COVENTRY	0.0	0.0	0.0
ERICKSON	1,028.1	825.9	1,854.0
EVERCARE	0.0	2.9	2.9
JAI	2,265.9	1,315.5	3,581.4
JOHNS HOPKINS	1,407.7	636.8	2,044.5
KAISER	5,031.0	1,592.3	6,623.3
MD PHYSICIAN CARE	9,650.2	10,144.2	19,794.3
MEDSTAR MEDICARE CHOICE	136.1	91.1	227.2
MEDSTAR PHYSICIAN PARTNERS	1,781.2	1,569.7	3,351.0
OTHER	1,730.2	776.4	2,506.5
PRIORITY PARTNERS	6,714.3	6,434.9	13,149.2
UNITED	7,281.4	5,737.8	13,019.3
UNIV OF MD HEALTH ADVANTAGE	1,366.3	846.1	2,212.5
UNIV OF MD HEALTH PARTNERS	1,468.9	1,129.3	2,598.2
VALUE OPTIONS	1,366.3	846.1	2,212.5
			, · _ · •
Total	54,142.8	44,784.3	98,927.1

FY 2018 SUPPLEMENTAL SCHEDULE - VI

Clinic Detail Visits, RVUs and Revenues by Clinic

Hospital Name:

Saint Agnes Hospital

Hospital Number:

0011

	Visits	RVUs	Revenue		
[a av .			4. 0.0		
Ostomy Clinic	5	40	\$1,848		
GI Infusion	22	402	\$17,530		
Coag	16,215	36,069	\$1,650,916		
CHF	1,843	44,253	\$2,026,825		
Diabetes	4,835	17,446	\$770,709		
WHC - Perinatology	4,036	20,638	\$948,623		
WHC - Oncology	453	926	\$42,383		
Pain Mgmt	281	2,836	\$127,576		
Medical Oncology	17,785	163,742	\$7,490,260		
Breast Center	103	622	\$28,493		
Radiation Therapy	908	3,598	\$164,485		
Wound Center	1,898	17,725	\$811,178		
Laboratory	62	2,232	\$119,257		
Total	48,446	310,529	\$14,200,082		

(V2 line 2 col. 3)

Hospital Records

SUPPLEMENTAL SCHEDULE VII Outpatient Services Survey Saint Agnes Hospital

For The Fiscal Year Ended June 30, 2018

Name of Outpatient Service & Rate Center if Applicable	Description of Services Provided	Physical Location/Address	Regulated/ Unregulated
Service & Nate Senter in Applicable	Booth Billion of Contract Provided	yo.ou. accumountumos	
\			

OUTPATIENT SERVICES NOT OWNED BY THE HOSPITAL LOCATED IN REGULATED SPACE

SUPPLEMENTAL SCHEDULE VIII

Saint Agnes Hospital

Debt Collection/Financial Assistance Report

For The Fiscal Year Ended June 30, 2018

1.	Col	lection Agency Name
	a.	TSI
	b.	
	c.	
	d.	
	e.	
	f.	
	g.	
	h.	
2.]		nber of Liens
	i.	
		nber of extended payment plans
	j.	
TELE	T A TA	ICIAL ASSISTANCE
rin	IAI	CUAL ASSISTANCE
4 1	Viir	nber of applications for financial assistance received
	k.	inder of applications for financial assistance received
	IX.	
5. 1	Nur	nber of applicants for financial assistance approved
	1.	

FY 2018 SUPPLEMENTAL SCHEDULE - IX

Annual Cost Survey Detail Support for "Other Expenses" Line U

Hospital Name: Saint Agnes Hospital

Hospital Number: 0011

(in 000's)

Detail Expense		Dollars
SOFTWARE LICENSE/MAINT	T1	
		\$689,550
PROVIDER TAX/ASSESSMEN		\$2,070,877
MINOR EQUIP	T3	\$3,758,482
ADVERTISING & PUBLICITY	T4	\$29,060
MANAGEMENT FEES	T5	\$41,661,418
MAINTENANCE & REPAIR	T6	\$618,489
DUES & MEMBERSHIPS	T7	\$419,372
BANK SERVICE CHARGES	T8	\$442,795
SEMINARS AND TRAINING	Т9	\$181,252
LICENSES/PERMITS	T10	\$159,997
TAXES	T11	\$341,684
BUSINESS EXPENSES	T12	\$45,692
OTHER	T13	-\$532,912
Total		\$49,885,758
ı Otai		40 926 261

49,836,361

SUPPLEMENTAL SCHEDULE - X

Gross Patient Revenue Reconciliation Schedule

Hospital Name: Saint Agnes Hospital Hospital Number: 0011 6/30/2018 Base Year:

Section I

TOTAL GROSS PATIENT REVENUE

		Col 1	Col 2	Col 3
Line#		Inpatient	Outpatient	Total
1	Total In-State Revenue	248,999	184,214	433,213
2	Total Out-State Revenue	3,416	2,067	5,483
3	Total Gross Patient Revenue	252,414	186,281	438,696

Section II

TOTAL MEDICARE/NON-FFS REVENUE

~_	L MEDIOANEMON-1 O NEVENOL						
		Col 1	Col 2	Col 3	Col 4	Col 5	
		In-State	Out-State	In-State	Out-State	Total	
		I/P Revenue	I/P Revenue	O/P Revenue	O/P Revenue	Revenue	
4[Medicare FFS Revenue	111,644	59,698	1,442	563	173,347	
5	Non-FFS Revenue	13,873	8,160	192	108	22,333	
6	Total Revenue	125,517	67,858	1,634	670	195,680	

			Regulated /
Name of Outpatient Service	Description of Services Provided	Physical Location/Address	Unregulated
AUDIOLOGY		HOSPITAL	REGULATED
	Provides diagnostic and therapeutic audiology services		
CARDIOLOGY	Provides electrocardiography services and other	HOSPITAL	REGULATED
•	noninvasive cardiology procedures		
CARDIAC REHAB	Program focused on physical and mental rehabilitation	HOSPITAL	REGULATED
	for heart patients		
CARDIAC CATH LAB	Provides cardiac catherization and noninvasive	HOSPITAL	REGULATED
	cardiology procedures.		
COAGULATION CLINIC	Provides point of care anti-coagulation management to	HOSPITAL	REGULATED
	patients.		
CAT SCAN	Computerized Axial Tomography services	HOSPITAL	REGULATED
DIAGNOSTIC IMAGING	Diagnostic radiology services	HOSPITAL	REGULATED
DIABETES EDUCATION	Provides diabetes and nutrional education	HOSPITAL	REGULATED
ENDOCRINOLOGY	Provides endocrinology consultative services	HOSPITAL	REGULATED
ADULT MAIN EMERGENCY		HOSPITAL	REGULATED
DEPT	Emergency Services focused on Adults		
CHEST PAIN EMERGENCY		HOSPITAL	REGULATED
DEPT	Emergency Services focused on chest pain symptons		
PEDIATRIC EMERGENCY DEPT		HOSPITAL	REGULATED
	Emergency Services focused on Pediatrics		
URGENT CARE EMERGENCY		HOSPITAL	REGULATED
DEPT	Emergency Services focused on immediate medical care		
EEG	ELECTROENCEPHALOGRAM SERVICES	HOSPITAL	REGULATED
EMG	ELECTROMYOGRAPHY SERVICES	HOSPITAL	REGULATED
G.I.SERVICES	GASTROINTESTINAL SUITE	HOSPITAL	REGULATED
LAB	LABORATORY SERVICES	HOSPITAL	REGULATED
MRI	Magnetic Resonance Imaging services	HOSPITAL	REGULATED
NUCLEAR MEDICINE	Relies on the process of radioactive decay in the	HOSPITAL	REGULATED
	diagnosis and treatment of disease		
OPHTHALMOLOGY		HOSPITAL	REGULATED
	Provides ophthalmology services including YAG Laser		
	treatment of posterior capsular opacification		
OPERATING ROOM	SURGICAL OPERATING ROOM	HOSPITAL	REGULATED
OSTOMY CLINIC	Provides Ostomy services	HOSPITAL	REGULATED

			Regulated /
Name of Outpatient Service	Description of Services Provided	Physical Location/Address	Unregulated
OCCUPATIONAL THERAPY		HOSPITAL	REGULATED
	Provides treatment to develop, recover, or maintain the		
	daily living and work skills of patients		
PAIN MANAGEMENT	Provides acute and chronic pain management	HOSPITAL	REGULATED
	interventions		
PHYSICAL THERAPY	Provides services to patients in order to develop,	HOSPITAL	REGULATED
	maintain and restore maximum movement and		
	functional ability		
PULMONARY	PULMONARY SERVICES	HOSPITAL	REGULATED
RESPIRATORY THERAPY	RESPIRATORY SERVICES	HOSPITAL	REGULATED
INTERVENTIONAL	Minimally invasive procedures are performed using	HOSPITAL	REGULATED
RADIOLOGY	image guidance		
SPEECH THERAPY	Provides diagnosis and treatment of a variety of speech,	HOSPITAL	REGULATED
	voice, and language disorders		
T.U.M.T	TRANSURETRAL MICROWAVE THERAPY	HOSPITAL	REGULATED
ULTRASOUND	Ultrasound Imaging Services	HOSPITAL	REGULATED
VASCULAR LAB		HOSPITAL	REGULATED
	Non invasive studies to evaluate arteries and veins		
WOMENS CTR ONC	Provides gynecologic oncology services	HOSPITAL	REGULATED
WOMEN'S HEALTH CENTER SA	Provides prenatal services and extra care for women	HOSPITAL	REGULATED
	managing high-risk pregnancies		
BREAST CENTER	Provides advanced breast cancer detection and	HOSPITAL	REGULATED
	treatment.		
ONCOLOGY MEDICAL	Cancer treatment primarily with drugs, i.e.	HOSPITAL	REGULATED
	chemotherapy		
ONCOLOGY RADIATION	Cancer treatment primarily with radiation	HOSPITAL	REGULATED
WOUND CENTER	Providers comprehensive wound care including	HOSPITAL	REGULATED
	hyperbaric oxygen services		
	Provides various diagnostic imaging services in a		UNREGULATED
SETON IMAGING	freestanding imaging center	3449 Wilkens Ave Baltimore, MD	
COMMUNITY CARE CENTER			UNREGULATED
at BALTIMORE MEDICAL			
SYSTEM (FQHC)	Provides various physician specialty consultative services	900 Caton Ave, Baltimore, MD	

			Regulated /
Name of Outpatient Service	Description of Services Provided	Physical Location/Address	Unregulated
			UNREGULATED
SETON MEDICAL GROUP			
PRIMARY CARE & OB/GYN -			
BALTIMORE NATIONAL PIKE	Primary Care services	6501 Baltimore National Pike. Baltimore, MD	
SETON MEDICAL GROUP			UNREGULATED
PRIMARY CARE - KINGS			***
CONTRIVANCE	Primary Care services	8325 Guilford Rd., Columbia, MD	
			UNREGULATED
SETON MEDICAL GROUP			
PRIMARY CARE - ELKRIDGE	Primary Care services	6518 Meadow Ridge Rd., Elkridge, MD	***
			UNREGULATED
SETON MEDICAL GROUP			****
PRIMARY CARE -			
COLUMBIA/OAKLAND MILLS	Primary Care services	9650 Santiago Rd., Ste. 109 Columbia, MD	
SETON MEDICAL GROUP			UNREGULATED
PRIMARY CARE - ELLICOTT			
CITY	Primary Care services	2850 N. Ridge Rd., Ellicott City, MD	
SETON MEDICAL GROUP			UNREGULATED
PRIMARY CARE -			
MARRIOTTSVILLE	Primary Care services	2400 Longstone Lane, Marriottsville, MD	
SETON MEDICAL GROUP			UNREGULATED
PRIMARY CARE - WILKENS			
AVE	Primary Care services	3449 Wilkens Ave, Suite 300, Baltimore, MD	
	-		UNREGULATED
SETON MEDICAL GROUP			
PRIMARY CARE - FOSTER AVE	Primary Care services	2801 Foster Ave., Baltimore, MD	
SETON MEDICAL GROUP			UNREGULATED
PRIMARY CARE - PINE			
HEIGHTS	Primary Care services	1001 Pine Heights Ave. Baltimore, MD	
SETON MEDICAL GROUP			UNREGULATED
OB/GYN - COLUMBIA	OB/GYN services	8945 Guilford Road, Columbia	
SETON MEDICAL GROUP			UNREGULATED
OB/GYN - WILKENS AVE	OB/GYN services	3449 Wilkens Ave., Baltimore	

Name of Outpatient Service	Description of Services Provided	Physical Location/Address	Regulated / Unregulated
SETON MEDICAL GROUP			UNREGULATED
OB/GYN - PINE HEIGHTS	OB/GYN services	1001 Pine Heights Ave. Baltimore, MD	
SETON MEDICAL GROUP			UNREGULATED
OB/GYN - ROLLING			
CROSSROADS	OB/GYN services	4 E. Rolling Crossroads, Catonsville, MD	
			UNREGULATED
COMMUNITY CARDIOLOGY	Provides cardiology consultative services	3407 Wilkens Ave Baltimore, MD	
			UNREGULATED
COMMUNITY CARDIOLOGY	Provides cardiology consultative services	5500 Knoll North Dr., Ste 250, Columbia, MD	
COMMUNITY BARIATRICS	Provides bariatric surgery consultative services	700 Geipe Road Catonsville, MD	UNREGULATED
COMMUNITY VASCULAR			UNREGULATED
SURGERY	Provides vascular surgery consultative services	3407 Wilkens Ave. Baltimore, MD	
AMBULATORY SURGERY			UNREGULATED
CENTER - COLUMBIA	Freestanding Ambulatory Surgery Center	11055 Little Patuxent Pkwy., Columbia, MD	
COMMUNITY GENERAL			UNREGULATED
SURGERY - COLUMBIA	Provides general surgery consultative services	10710 Charter Dr., Columbia, MD	
COMMUNITY GENERAL			UNREGULATED
SURGERY - FULTON	Provides breast surgery consultative services	7625 Maple Lawn Blvd., Fulton, MD	
COMMUNITY GENERAL			UNREGULATED
SURGERY - WILKENS	Provides general surgery consultative services	3407 Wilkens Ave Baltimore, MD	
COMMUNITY NEUROLOGY	Provides neurology consultative services	3407 Wilkens Ave Baltimore, MD	UNREGULATED
			UNREGULATED
COMMUNITY ORTHOPEDIC			
SURGERY - WILKENS	Provides orthopedic surgery consultative services	3449 Wilkens Ave Baltimore, MD	
COMMUNITY			UNREGULATED
OTOLARYNGOLOGY	Provides ENT surgery consultative services	3449 Wilkens Ave Baltimore, MD	
COMMUNITY		10025 Governor Warfield Pkwy, Suite 410,	UNREGULATED
OTOLARYNGOLOGY	Provides ENT surgery consultative services	Columbia, MD	
COMMUNITY PAIN			UNREGULATED
MANAGEMENT	Provides pain management consultative services	3449 Wilkens Ave Baltimore, MD	
COMMUNITY PLASTIC			UNREGULATED
SURGERY - FREDERICK RD	Provides Plastic surgery consultative services	300 Frederick Rd., Catonsville, MD	
COMMUNITY PLASTIC			UNREGULATED
SURGERY - COLUMBIA	Provides Plastic surgery consultative services	10710 Charter Dr., Columbia, MD	

			Regulated /
Name of Outpatient Service	Description of Services Provided	Physical Location/Address	Unregulated
COMMUNITY PULMONARY			UNREGULATED
MEDICINE	Provides Pulmonary Medicine consultative services	3407 Wilkens Ave., Baltimore, MD	
COMMUNITY THORACIC			UNREGULATED
SURGERY	Provides Throracic surgery consultative services	3407 Wilkens Ave., Baltimore, MD	
COMMUNITY THORACIC			UNREGULATED
SURGERY	Provides Thoracic surgery consultative services	10710 Charter Dr., Columbia, MD	
			UNREGULATED
IMMUNO-THERAPY CENTER	Provides immuno-oncology infusion services	900 Caton Ave, Baltimore, MD	
COMPREHENSIVE CARE	Provides internal medicine consultative services to high		UNREGULATED
CENTER	risk patients	900 Caton Ave, Baltimore, MD	

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OUTPATIENT SERVICES NOT OWNED BY THE HOSPITAL - LOCATED IN PRINCIPAL HOSPITAL BUILDINGS OR LOCATED IN OTHER BUILDINGS IN WHICH REGULATED SERVICES ARE PROVIDED

			Regulated /
Name of Outpatient Service		Physical Location/Address	Unregulated
Chesapeake Urology	Provides urology consultative services	3407 Wilkens Ave., Suite 210, Baltimore, MD	Unregulated
Advanced Dental Care	OP Dental Services	3407 Wilkens Ave., Suite 205, Baltimore, MD	Unregulated
Seton Pain & Rehab Center	Pain Management Services	3407 Wilkens Ave., Suite 240, Baltimore, MD	Unregulated