

**Edward McCready Memorial Hospital**

**HSCRC ANNUAL REPORT OF  
REVENUES, EXPENSES, AND VOLUMES**

**FOR FISCAL YEAR ENDED  
June 30, 2018**

## ROUTINE SERVICE VOLUMES AND PATIENT DAYS

INSTITUTION NAME Edward McCready Memorial Hospital

FISCAL YEAR 6/30/18

INSTITUTION NUMBER 0045

BUDGET YEAR 6/30/18

| REPORTING SCHEDULE |     | CENTER                             | COL 1<br>ADMISSIONS | COL 2<br>PATIENTS<br>DAYS | COL 3<br>INTRA HOSPITAL<br>TRANSFERS IN | COL 4<br>LENGTH OF STAY        | COL 5<br>AVERAGE<br>LICENSED BEDS | COL 6<br>%OCCUPANCY      |
|--------------------|-----|------------------------------------|---------------------|---------------------------|---|--------------------------------|-----------------------------------|--------------------------|
| SOURCE             |     |                                    | RECORDS             | RECORDS                   | RECORDS                                 | (COL. 2) /<br>(COL.1 + COL. 3) | RECORDS                           | COL.2/(COL.4*365)<br>(6) |
| D1                 | MSG | MEDICAL SURGICAL<br>ACUTE          | 226                 | 786                       |   | 3.5                            | 3                                 | 0.718                    |
| D2                 | PED | PEDIATRIC ACUTE                    |                     |                           |   |                                |                                   |                          |
| D3                 | PSY | PSYCHIATRIC ACUTE                  |                     |                           |   |                                |                                   |                          |
| D4                 | OBS | OBSTETRICS ACUTE                   |                     |                           |   |                                |                                   |                          |
| D5                 | DEF | DEFINITIVE<br>OBSERVATION          |                     |                           |   |                                |                                   |                          |
| D6                 | MIS | MEDICAL SURGICAL<br>INTENSIVE CARE |                     |                           |   |                                |                                   |                          |
| D7                 | CCU | CORONARY CARE                      |                     |                           |   |                                |                                   |                          |
| D8                 | PIC | PEDIATRIC<br>INTENSIVE CARE        |                     |                           |   |                                |                                   |                          |
| D9                 | NEO | NEONATAL<br>INTENSIVE CARE         |                     |                           |   |                                |                                   |                          |
| D10                | BUR | BURN CARE                          |                     |                           |   |                                |                                   |                          |
| D11                | PSI | PSYCHIATRIC<br>INTENSIVE CARE      |                     |                           |   |                                |                                   |                          |
| D12                | TRM | SHOCK TRAUMA                       |                     |                           |   |                                |                                   |                          |
| D13                | ONC | ONCOLOGY                           |                     |                           |   |                                |                                   |                          |
| D14                | NUR | NEWBORN NURSERY                    |                     |                           |   |                                |                                   |                          |
| D15                | PRE | PREMATURE<br>NURSERY               |                     |                           |   |                                |                                   |                          |
| D54                | RHB | REHABILITATION                     |                     |                           |   |                                |                                   |                          |
| D70                | PAD | PSYCH, ADULT                       |                     |                           |   |                                |                                   |                          |
| D71                | PCD | PSYCH,<br>CHILD/ADOLESCENT         |                     |                           |   |                                |                                   |                          |
| D73                | PSG | PSYCH, GERIATRIC                   |                     |                           |   |                                |                                   |                          |
| XXX                |     | SUBTOTAL                           | 226                 | 786                       | 0                                       | 3.5                            | 3                                 | 0.718                    |
| XXXXXX             |     | TOTAL                              | 226                 | 786                       | 0                                       | 3.5                            | 3                                 | 0.718                    |

AMBULATORY UNITS

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

| REPORTING SCHEDULE |     | CENTER                        | COL 1<br>INPATIENT VISITS | COL 2<br>OUTPATIENT VISITS | COL 3<br>TOTAL VISITS | COL 4<br>INPATIENT RVU'S | COL 5<br>OUTPATIENT RVU'S | COL. 6<br>TOTAL RVU'S |
|--------------------|-----|-------------------------------|---------------------------|----------------------------|-----------------------|--------------------------|---------------------------|-----------------------|
| SOURCE             |     |                               | RECORDS                   | RECORDS                    | COL 1 + COL 2         | RECORDS                  | RECORDS                   | COL 4 + COL 5         |
| D18                | EMG | EMERGENCY SERVICES            | 365                       | 4,871                      | 5,236                 | 3,115                    | 41,563                    | 44,678                |
| D19                | CL  | CLINIC SERVICES               | 152                       | 7,752                      | 7,904                 | 911                      | 46,496                    | 47,407                |
| D20                | PDC | PSYCH DAY/NIGHT CARE SERVICES | 0                         |                            | 0                     |                          |                           | 0                     |
| D22                | SDS | SAME DAY SURGERY              | 1                         | 383                        | 384                   | 1                        | 378                       | 379                   |
| D50                | FSE | FREE STANDING EMERGENCY       |                           |                            | 0                     |                          |                           | 0                     |
| D55                | OBV | OBSERVATION                   | 44                        | 162                        | 206                   | 1,557                    | 3,242                     | 4,799                 |
| D58                | OCL | ONCOLOGY                      |                           |                            | 0                     |                          |                           | 0                     |
| N/A                | PAP | REFERRED AMBULATORY SERVICES  |                           |                            | 0                     |                          |                           | 0                     |
|                    |     |                               |                           |                            |                       |                          |                           |                       |
|                    |     |                               |                           |                            |                       |                          |                           |                       |
|                    |     |                               |                           |                            |                       |                          |                           |                       |
|                    |     |                               |                           |                            |                       |                          |                           |                       |
|                    |     |                               |                           |                            |                       |                          |                           |                       |
|                    |     |                               |                           |                            |                       |                          |                           |                       |
|                    |     | TOTAL                         | 562                       | 13,168                     | 13,730                | 5,584                    | 91,679                    | 97,263                |



EQUIVALENT INPATIENT DAYS  
AND ADMISSIONS

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|                                    |   | COL.1     | COL.2       |
|------------------------------------|---|-----------|-------------|
| EQUIVALENT INPATIENT DAYS (EIPD'S) |   | BASE YEAR | BUDGET YEAR |
| A                                  | GROSS INPATIENT REVENUE                   | 2,702.3   | 2,702.3     |
| B                                  | INPATIENT GRANT REVENUE                   |           | 0.0         |
| C                                  | TOTAL INPATIENT REVENUE                   | 2,702.3   | 2,702.3     |
| D                                  | TOTAL INPATIENT DAYS (IPD'S) EXCL NURSERY | 786       | 786         |
| E                                  | INPATIENT UNIT REVENUE                    | 3.4380    | 3.4380      |
| F                                  | GROSS OUTPATIENT REVENUE                  | 14,445.0  | 14,445.0    |
| G                                  | OUTPATIENT GRANT REVENUE                  |           | 0.00        |
| H                                  | TOTAL OUTPATIENT REVENUE                  | 14,445.0  | 14,445.0    |
| I                                  | TOTAL OUTPATIENT VISITS                   | 13,168    | 13,168      |
| J                                  | OUTPATIENT UNIT REVENUE                   | 1.09696   | 1.09696     |
| K                                  | IP/OP UNIT REVENUE RATIO                  | 3.13414   | 3.13414     |
| L                                  | INPATIENT EQUIVALENT OF OUTPATIENT VISITS | 4,201.5   | 4,201.5     |
| M                                  | EQUIVALENT INPATIENT DAYS (EIPD'S)        | 4,988     | 4,988       |

  

| EQUIVALENT INPATIENT ADMISSIONS (EIPA'S) |   | BASE YEAR | BUDGET YEAR |
|--|---|-----------|-------------|
| N  | TOTAL INPATIENT ADMISSIONS (EXCL NURSERY) | 226       | 226         |
| O  | INPATIENT UNIT REVENUE                    | 11.95708  | 11.95708    |
| P  | OUTPATIENT UNIT REVENUE                   | 1.09696   | 1.09696     |
| Q  | IP/OP UNIT REVENUE RATIO                  | 10.90017  | 10.90017    |
| R  | INPATIENT EQUIVALENT OF OUTPATIENT VISITS | 1,208.1   | 1,208.1     |
| S  | EQUIVALENT INPATIENT ADMISSIONS (EIPA'S)  | 1,434     | 1,434       |

UNASSIGNED EXPENSE

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|                  |   | COL. 1<br>8830           | COL. 2<br>8840     | COL. 3<br>8880         | COL. 4   | COL. 5<br>8810                    | COL. 6<br>8820      | COL. 7<br>8850      | COL. 8<br>8860         | COL. 9<br>8870        | COL. 10           |         |   |
|------------------|---|--------------------------|--------------------|------------------------|----------|-----------------------------------|---------------------|---------------------|------------------------|-----------------------|-------------------|---------|---|
|                  | SOURCE                                    | MALPRACTICE<br>INSURANCE | OTHER<br>INSURANCE | MEDICAL<br>CARE REVIEW | SUBTOTAL | DEPRECIATION<br>&<br>AMORTIZATION | LEASES &<br>RENTALS | LICENSES &<br>TAXES | INTEREST<br>SHORT TERM | INTEREST<br>LONG TERM | TOTAL<br>EXPENSES |         |   |
| BASE YEAR DATA   |   |                          |                    |                        |          |                                   |                     |                     |                        |                       |                   |         |   |
|                  |   | MAL                      | OIN                | MCR                    |          | DEP                               | LEA                 | LIC                 | IST                    | ILT                   |                   |         |   |
| A                | BASE YEAR EXPENSES                        | RECORDS                  | 141.7              | 82.9                   | 0.0      | 224.6                             | 681.4               | 439.2               | 0.0                    | 0.0                   | 87.7              | 1,432.9 | A |
| B                | ALLOCATIONS TO AUX ENT., & UNREG SERVICES | RECORDS                  | 0.0                | 0.0                    | 0.0      | 0.0                               | (12.7)              | (8.2)               | 0.0                    | 0.0                   | (1.6)             | (22.5)  | B |
| C                | BASE YEAR EXPENSES - ADJ.                 | A+B                      | 141.7              | 82.9                   | 0.0      | 224.6                             | 668.7               | 431.0               | 0.0                    | 0.0                   | 86.1              | 1,410.4 | C |
| BUDGET YEAR DATA |   |                          |                    |                        |          |                                   |                     |                     |                        |                       |                   |         |   |
| D                | INFLATION                                 | HSCRC                    |                    |                        |          |                                   |                     |                     |                        |                       |                   |         | D |
| E                | OPERATING ECONOMICS                       | BUDGET                   |                    |                        |          |                                   |                     |                     |                        |                       |                   |         | E |
| F                | NEW PROGRAMS                              | BUDGET                   |                    |                        |          |                                   |                     |                     |                        |                       |                   |         | F |
| G                | MISC. ADJUSTMENTS                         | BUDGET                   |                    |                        |          |                                   |                     |                     |                        |                       |                   |         | G |
| H                | BUDGET YEAR EXPENSES                      | C+D+E+F+G                |                    |                        |          |                                   |                     |                     |                        |                       |                   |         | H |

HOSPITAL BASED PHYSICIANS

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

|             |                         | COL. 1   | COL. 2                 | COL. 3              | COL. 4                 | COL. 5          | COL. 6    | COL. 7 |     |
|-------------|-------------------------|----------|------------------------|---------------------|------------------------|-----------------|-----------|--------|-----|
|             |                         | RESEARCH | CHIEF OF MEDICAL STAFF | MEDICAL CARE REVIEW | ADMINIS. & SUPERVISION | PART B SERVICES | EDUCATION | TOTAL  |     |
| COST CENTER | CODE                    |          |                        |                     |                        |                 |           |        |     |
| A1          | MEDICAL SURGICAL ACUTE  | MSG      |                        |                     | 31.8                   |                 |           | 31.8   | A1  |
| A2          | PEDIATRICS ACUTE        | PED      |                        |                     |                        |                 |           |        | A2  |
| A3          | PSYCHIATRIC ACUTE       | PSY      |                        |                     |                        |                 |           |        | A3  |
| A4          | OBSTETRICS ACUTE        | OBS      |                        |                     |                        |                 |           |        | A4  |
| A5          | DEFINITIVE OBSERVATION  | DEF      |                        |                     |                        |                 |           |        | A5  |
| A6          | M/S INTENSIVE CARE      | MIS      |                        |                     |                        |                 |           |        | A6  |
| A7          | CORONARY CARE           | CCU      |                        |                     |                        |                 |           |        | A7  |
| A8          | PEDIATRIC ACUTE         | PIC      |                        |                     |                        |                 |           |        | A8  |
| A9          | NEO-NATAL INTEN. CARE   | NEO      |                        |                     |                        |                 |           |        | A9  |
| A10         | BURN CARE               | BUR      |                        |                     |                        |                 |           |        | A10 |
| A11         | PSYCHIATRIC ACUTE       | PSI      |                        |                     |                        |                 |           |        | A11 |
| A12         | SHOCK TRAUMA            | TRM      |                        |                     |                        |                 |           |        | A12 |
| A13         | ONCOLOGY                | ONC      |                        |                     |                        |                 |           |        | A13 |
| A14         | NEWBORN NURSERY         | NUR      |                        |                     |                        |                 |           |        | A14 |
| A15         | PREMATURE NURSERY       | PRE      |                        |                     |                        |                 |           |        | A15 |
| A16         | REHABILITATION          | RHB      |                        |                     |                        |                 |           |        | A16 |
| A17         | INTERMEDIATE CARE       | ICC      |                        |                     |                        |                 |           |        | A17 |
| A18         | EMERGENCY SERVICES      | EMG      |                        |                     | 768.0                  |                 |           | 768.0  | A18 |
| A19         | CLINIC SERVICES         | CL       |                        |                     |                        |                 |           |        | A19 |
| A20         | PSYCH DAY/NIGHT CARE    | PDC      |                        |                     |                        |                 |           |        | A20 |
| A21         | SAME DAY SURGERY        | SDS      |                        |                     |                        |                 |           |        | A21 |
| A22         | LITHOTRIPSY             | LIT      |                        |                     |                        |                 |           |        | A22 |
| A23         | LABOR & DELIVERY SERV.  | DEL      |                        |                     |                        |                 |           |        | A23 |
| A24         | OPERATING ROOM          | OR       |                        |                     | 0.9                    |                 |           | 0.9    | A24 |
| A25         | OPERATING ROOM Clinic   | ORC      |                        |                     |                        |                 |           |        | A25 |
| A26         | ANESTHESIOLOGY          | ANS      |                        |                     |                        |                 |           |        | A26 |
| A27         | LABORATORY SERVICES     | LAB      |                        |                     | 34.2                   |                 |           | 34.2   | A27 |
| A28         | CLINIC SERVICES PRIMARY | CLP      |                        |                     |                        |                 |           |        | A28 |
| A29         | ELECTROCARDIOGRAPHY     | EKG      |                        |                     |                        |                 |           |        | A29 |
| A30         | CARDIAC CATHERIZATION   | IRC      |                        |                     |                        |                 |           |        | A30 |
| A31         | RADIOLOGY-DIAGNOSTIC    | RAD      |                        |                     |                        |                 |           |        | A31 |
| A32         | CAT SCANNER             | CAT      |                        |                     |                        |                 |           |        | A32 |

HOSPITAL BASED PHYSICIANS

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

| COL. 1   | COL. 2                 | COL. 3              | COL. 4                 | COL. 5          | COL. 6    | COL. 7 |
|----------|------------------------|---------------------|------------------------|-----------------|-----------|--------|
| RESEARCH | CHIEF OF MEDICAL STAFF | MEDICAL CARE REVIEW | ADMINIS. & SUPERVISION | PART B SERVICES | EDUCATION | TOTAL  |

| COST CENTER | CODE                      |     |  |  |  |     |  |     |     |
|-------------|---------------------------|-----|--|--|--|-----|--|-----|-----|
| A33         | RADIOLOGY THERAPEUTIC     | RAT |  |  |  |     |  |     | A33 |
| A34         | NUCLEAR MEDICINE          | NUC |  |  |  |     |  |     | A34 |
| A35         | RESPIRATORY THERAPY       | RES |  |  |  |     |  |     | A35 |
| A36         | PULMONARY THERAPY         | PUL |  |  |  |     |  |     | A36 |
| A37         | ELECTROENCEPHALOGRAPHY    | EEG |  |  |  |     |  |     | A37 |
| A38         | PHYSICAL THERAPY          | PTH |  |  |  |     |  |     | A38 |
| A39         | OCCUPATIONAL THERAPY      | OTH |  |  |  |     |  |     | A39 |
| A40         | SPEECH THERAPY            | STH |  |  |  |     |  |     | A40 |
| A41         | RECREATIONAL THERAPY      | REC |  |  |  |     |  |     | A41 |
| A42         | AUDIOLOGY                 | AUD |  |  |  |     |  |     | A42 |
| A43         | OTHER PHYSICAL MEDICINE   | OPM |  |  |  |     |  |     | A43 |
| A44         | RENAL DIALYSIS            | RDL |  |  |  |     |  |     | A44 |
| A45         | ORGAN ACQUISITION         | OA  |  |  |  |     |  |     | A45 |
| A46         | AMBULATORY SURGERY        | AOR |  |  |  |     |  |     | A46 |
| A47         | LEUKOPHERESIS             | LEU |  |  |  |     |  |     | A47 |
| A48         | HYPERBARIC CHAMBER        | HYP |  |  |  |     |  |     | A48 |
| A49         | FREE STANDING EMG SEV.    | FSE |  |  |  |     |  |     | A49 |
| A50         | MEDICAL STAFF ADMIN.      | MSA |  |  |  |     |  |     | A50 |
| A51         | POST GRAD MED. EDUCATION  | PME |  |  |  |     |  |     | A51 |
| A52         | MRI SCANNER MRI           | MRI |  |  |  | 3.9 |  | 3.9 | A52 |
| A53         | O/P SURGERY - PROC. BASED | AMS |  |  |  |     |  |     | A53 |
| A54         |                           |     |  |  |  |     |  |     | A54 |
| A55         |                           |     |  |  |  |     |  |     | A55 |

|   |        |     |  |  |  |       |  |       |   |
|---|--------|-----|--|--|--|-------|--|-------|---|
| B | TOTALS | /// |  |  |  | 838.6 |  | 838.6 | B |
|---|--------|-----|--|--|--|-------|--|-------|---|

|   |                      |     |    |     |    |        |         |         |      |   |
|---|----------------------|-----|----|-----|----|--------|---------|---------|------|---|
| C | COST CENTER SCHEDULE | /// | F1 | C13 | UA | D1-D56 | P2A-P2I | P4A-PHI | //// | C |
|---|----------------------|-----|----|-----|----|--------|---------|---------|------|---|



PHYSICIANS PART B SERVICES

P2A

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

| SOURCE | COL. 1<br>MEDICAL<br>SURGICAL | COL. 2<br>PEDIATRICS | COL. 3<br>PSYCHIATRIC | COL. 4<br>OBSTETRICS<br>ACUTE | COL. 5<br>DEFINITIVE<br>OBSERVATION | COL. 6<br>M/S<br>INTENSIVE<br>CARE | COL. 7<br>CORONARY<br>CARE |
|--------|-------------------------------|----------------------|-----------------------|-------------------------------|-------------------------------------|------------------------------------|----------------------------|
|        | MSG                           | PED                  | PSY                   | OBS                           | DEF                                 | MIS                                | CCU                        |

BASE YEAR DATA

|   |                                    |             |  |  |  |  |  |  |   |
|---|------------------------------------|-------------|--|--|--|--|--|--|---|
| A | BASE YEAR EXPENSES                 | SCH P1A,P1B |  |  |  |  |  |  | A |
| B | ALLOCATION FROM CAFE, PARKING, ETC | SCH OAC     |  |  |  |  |  |  | B |
| C | DONATED EXPENSES                   | RECORDS     |  |  |  |  |  |  | C |
| D | BASE YEAR EXPENSES ALLOCATED       | A+B+C       |  |  |  |  |  |  | D |

INFLATION FACTOR

|   |                  |       |  |  |  |  |  |  |   |
|---|------------------|-------|--|--|--|--|--|--|---|
| E | INFLATION FACTOR | HSCRC |  |  |  |  |  |  | E |
|---|------------------|-------|--|--|--|--|--|--|---|

BUDGET YEAR DATA

|   |                           |         |  |  |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|--|--|---|
| F | INFLATION                 | E x D   |  |  |  |  |  |  | F |
| G | NEW PROGRAM               | BUDGET  |  |  |  |  |  |  | G |
| H | MISCELLANEOUS ADJUSTMENTS | BUDGET  |  |  |  |  |  |  | H |
| I | BUDGET YEAR EXPENSES      | D+F+G+H |  |  |  |  |  |  | I |

FTE INFORMATION

|   |                                  |         |  |  |  |  |  |  |   |
|---|----------------------------------|---------|--|--|--|--|--|--|---|
| J | ADJUST BASE YR HRS WORKED / 2080 | RECORDS |  |  |  |  |  |  | J |
| K | BUDGET YR HRS WORKED / 2080      | BUDGET  |  |  |  |  |  |  | K |

PHYSICIANS PART B SERVICES

P2B

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|        | COL. 1                   | COL. 2                   | COL. 3    | COL. 4                     | COL. 5       | COL. 6   | COL. 7          |
|--------|--------------------------|--------------------------|-----------|----------------------------|--------------|----------|-----------------|
| SOURCE | PEDIATRIC INTENSIVE CARE | NEO-NATAL INTENSIVE CARE | BURN CARE | PSYCHIATRIC INTENSIVE CARE | SHOCK TRAUMA | ONCOLOGY | NEWBORN NURSERY |
|        | PIC                      | NEO                      | BUR       | PSI                        | TRM          | ONC      | NUR             |

BASE YEAR DATA

|   |                                   |             |  |  |  |  |  |  |  |   |
|---|-----------------------------------|-------------|--|--|--|--|--|--|--|---|
| A | BASE YEAR EXPENSES                | SCH P1A,P1B |  |  |  |  |  |  |  | A |
| B | ALLOCATION FROM CAFE, PARKING,ETC | SCH OAD     |  |  |  |  |  |  |  | B |
| C | DONATED EXPENSES                  | RECORDS     |  |  |  |  |  |  |  | C |
| D | BASE YEAR EXPENSES ALLOCATED      | A+B+C       |  |  |  |  |  |  |  | D |

INFLATION FACTOR

|   |                  |       |  |  |  |  |  |  |  |   |
|---|------------------|-------|--|--|--|--|--|--|--|---|
| E | INFLATION FACTOR | HSCRC |  |  |  |  |  |  |  | E |
|---|------------------|-------|--|--|--|--|--|--|--|---|

BUDGET YEAR DATA

|   |                           |         |  |  |  |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|--|--|--|---|
| F | INFLATION                 | E x D   |  |  |  |  |  |  |  | F |
| G | NEW PROGRAM               | BUDGET  |  |  |  |  |  |  |  | G |
| H | MISCELLANEOUS ADJUSTMENTS | BUDGET  |  |  |  |  |  |  |  | H |
| I | BUDGET YEAR EXPENSES      | D+F+G+H |  |  |  |  |  |  |  | I |

FTE INFORMATION

|   |                                  |         |  |  |  |  |  |  |  |   |
|---|----------------------------------|---------|--|--|--|--|--|--|--|---|
| J | ADJUST BASE YR HRS WORKED / 2080 | RECORDS |  |  |  |  |  |  |  | J |
| K | BUDGET YR HRS WORKED / 2080      | BUDGET  |  |  |  |  |  |  |  | K |

015



PHYSICIANS PART B SERVICES

P2D

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|        | COL. 1         | COL. 2              | COL. 3            | COL. 4              | COL. 5     | COL. 6                        | COL. 7                   |
|--------|----------------|---------------------|-------------------|---------------------|------------|-------------------------------|--------------------------|
| SOURCE | MRI<br>SCANNER | LABOR &<br>DELIVERY | OPERATING<br>ROOM | ANESTHES-<br>IOLOGY | LABORATORY | CLINIC<br>SERVICES<br>PRIMARY | ELECTROCARD-<br>IOGRAPHY |
|        | MRI            | DEL                 | OR                | ANS                 | LAB        | CLP                           | EKG                      |

BASE YEAR DATA

|   |                                    |             |  |  |  |  |  |  |  |   |
|---|------------------------------------|-------------|--|--|--|--|--|--|--|---|
| A | BASE YEAR EXPENSES                 | SCH P1A,P1B |  |  |  |  |  |  |  | A |
| B | ALLOCATION FROM CAFE, PARKING, ETC | SCH OAD     |  |  |  |  |  |  |  | B |
| C | DONATED EXPENSES                   | RECORDS     |  |  |  |  |  |  |  | C |
| D | BASE YEAR EXPENSES ALLOCATED       | A+B+C       |  |  |  |  |  |  |  | D |

INFLATION FACTOR

|   |                  |       |  |  |  |  |  |  |  |   |
|---|------------------|-------|--|--|--|--|--|--|--|---|
| E | INFLATION FACTOR | HSCRC |  |  |  |  |  |  |  | E |
|---|------------------|-------|--|--|--|--|--|--|--|---|

BUDGET YEAR DATA

|   |                           |         |  |  |  |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|--|--|--|---|
| F | INFLATION                 | E x D   |  |  |  |  |  |  |  | F |
| G | NEW PROGRAM               | BUDGET  |  |  |  |  |  |  |  | G |
| H | MISCELLANEOUS ADJUSTMENTS | BUDGET  |  |  |  |  |  |  |  | H |
| I | BUDGET YEAR EXPENSES      | D+F+G+H |  |  |  |  |  |  |  | I |

FTE INFORMATION

|   |                                  |         |  |  |  |  |  |  |  |   |
|---|----------------------------------|---------|--|--|--|--|--|--|--|---|
| J | ADJUST BASE YR HRS WORKED / 2080 | RECORDS |  |  |  |  |  |  |  | J |
| K | BUDGET YR HRS WORKED / 2080      | BUDGET  |  |  |  |  |  |  |  | K |

PHYSICIANS PART B SERVICES

P2E

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|        | COL. 1                          | COL. 2                  | COL. 3        | COL. 4                   | COL. 5              | COL. 6                 | COL. 7                           |
|--------|---------------------------------|-------------------------|---------------|--------------------------|---------------------|------------------------|----------------------------------|
| SOURCE | CARDIAC<br>CATHETER-<br>IZATION | RADIOLOGY<br>DIAGNOSTIC | CT<br>SCANNER | RADIOLOGY<br>THERAPEUTIC | NUCLEAR<br>MEDICINE | RESPIRATORY<br>THERAPY | PULMONARY<br>FUNCTION<br>TESTING |
|        | CAC                             | RAD                     | CAT           | RAT                      | NUC                 | RES                    | PUL                              |

BASE YEAR DATA

|   |                                   |             |  |  |  |  |  |  |  |   |
|---|-----------------------------------|-------------|--|--|--|--|--|--|--|---|
| A | BASE YEAR EXPENSES                | SCH P1A,P1B |  |  |  |  |  |  |  | A |
| B | ALLOCATION FROM CAFE, PARKING,ETC | SCH OAD     |  |  |  |  |  |  |  | B |
| C | DONATED EXPENSES                  | RECORDS     |  |  |  |  |  |  |  | C |
| D | BASE YEAR EXPENSES ALLOCATED      | A+B+C       |  |  |  |  |  |  |  | D |

INFLATION FACTOR

|   |                  |       |  |  |  |  |  |  |  |   |
|---|------------------|-------|--|--|--|--|--|--|--|---|
| E | INFLATION FACTOR | HSCRC |  |  |  |  |  |  |  | E |
|---|------------------|-------|--|--|--|--|--|--|--|---|

BUDGET YEAR DATA

|   |                           |         |  |  |  |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|--|--|--|---|
| F | INFLATION                 | E x D   |  |  |  |  |  |  |  | F |
| G | NEW PROGRAM               | BUDGET  |  |  |  |  |  |  |  | G |
| H | MISCELLANEOUS ADJUSTMENTS | BUDGET  |  |  |  |  |  |  |  | H |
| I | BUDGET YEAR EXPENSES      | D+F+G+H |  |  |  |  |  |  |  | I |

FTE INFORMATION

|   |                                  |         |  |  |  |  |  |  |  |   |
|---|----------------------------------|---------|--|--|--|--|--|--|--|---|
| J | ADJUST BASE YR HRS WORKED / 2080 | RECORDS |  |  |  |  |  |  |  | J |
| K | BUDGET YR HRS WORKED / 2080      | BUDGET  |  |  |  |  |  |  |  | K |

PHYSICIANS PART B SERVICES

P2F

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

| SOURCE | COL. 1                                  | COL. 2                     | COL. 3                         | COL. 4                    | COL. 5                         | COL. 6           | COL. 7                               |
|--------|---|----------------------------|--------------------------------|---------------------------|--------------------------------|------------------|--------------------------------------|
|        | ELECTRO-<br>ENCEPHALO-<br>GRAPHY<br>EEG | PHYSICAL<br>THERAPY<br>PTH | OCCUPATIONAL<br>THERAPY<br>OTH | SPEECH<br>LANGUAGE<br>STH | RECREATIONAL<br>THERAPY<br>REC | AUDIOLOGY<br>AUD | OTHER<br>PHYSICAL<br>MEDICINE<br>OPM |

BASE YEAR DATA

|   |                                   |             |  |  |  |  |  |  |  |   |
|---|-----------------------------------|-------------|--|--|--|--|--|--|--|---|
| A | BASE YEAR EXPENSES                | SCH P1A,P1B |  |  |  |  |  |  |  | A |
| B | ALLOCATION FROM CAFE, PARKING,ETC | SCH OAE     |  |  |  |  |  |  |  | B |
| C | DONATED EXPENSES                  | RECORDS     |  |  |  |  |  |  |  | C |
| D | BASE YEAR EXPENSES ALLOCATED      | A+B+C       |  |  |  |  |  |  |  | D |

INFLATION FACTOR

|   |                  |       |  |  |  |  |  |  |  |   |
|---|------------------|-------|--|--|--|--|--|--|--|---|
| E | INFLATION FACTOR | HSCRC |  |  |  |  |  |  |  | E |
|---|------------------|-------|--|--|--|--|--|--|--|---|

BUDGET YEAR DATA

|   |                           |         |  |  |  |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|--|--|--|---|
| F | INFLATION                 | E x D   |  |  |  |  |  |  |  | F |
| G | NEW PROGRAM               | BUDGET  |  |  |  |  |  |  |  | G |
| H | MISCELLANEOUS ADJUSTMENTS | BUDGET  |  |  |  |  |  |  |  | H |
| I | BUDGET YEAR EXPENSES      | D+F+G+H |  |  |  |  |  |  |  | I |

FTE INFORMATION

|   |                                  |         |  |  |  |  |  |  |  |   |
|---|----------------------------------|---------|--|--|--|--|--|--|--|---|
| J | ADJUST BASE YR HRS WORKED / 2080 | RECORDS |  |  |  |  |  |  |  | J |
| K | BUDGET YR HRS WORKED / 2080      | BUDGET  |  |  |  |  |  |  |  | K |

PHYSICIANS PART B SERVICES

P2G

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

| SOURCE | COL. 1         | COL. 2            | COL. 3             | COL. 4        | COL. 5             | COL. 6                  | COL. 7      |
|--------|----------------|-------------------|--------------------|---------------|--------------------|-------------------------|-------------|
|        | RENAL DIALYSIS | ORGAN ACQUISITION | AMBULATORY SURGERY | LEUKOPHERESIS | HYPERBARIC CHAMBER | FREE STANDING EMERGENCY | LITHOTRIPSY |
|        | RDL            | OA                | AOR                | LEU           | HYP                | FSE                     | LIT         |

BASE YEAR DATA

|   |                                   |             |  |  |  |  |  |  |  |   |
|---|-----------------------------------|-------------|--|--|--|--|--|--|--|---|
| A | BASE YEAR EXPENSES                | SCH P1A,P1B |  |  |  |  |  |  |  | A |
| B | ALLOCATION FROM CAFE, PARKING,ETC | SCH OAE     |  |  |  |  |  |  |  | B |
| C | DONATED EXPENSES                  | RECORDS     |  |  |  |  |  |  |  | C |
| D | BASE YEAR EXPENSES ALLOCATED      | A+B+C       |  |  |  |  |  |  |  | D |

INFLATION FACTOR

|   |                  |       |  |  |  |  |  |  |  |   |
|---|------------------|-------|--|--|--|--|--|--|--|---|
| E | INFLATION FACTOR | HSCRC |  |  |  |  |  |  |  | E |
|---|------------------|-------|--|--|--|--|--|--|--|---|

BUDGET YEAR DATA

|   |                           |         |  |  |  |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|--|--|--|---|
| F | INFLATION                 | E x D   |  |  |  |  |  |  |  | F |
| G | NEW PROGRAM               | BUDGET  |  |  |  |  |  |  |  | G |
| H | MISCELLANEOUS ADJUSTMENTS | BUDGET  |  |  |  |  |  |  |  | H |
| I | BUDGET YEAR EXPENSES      | D+F+G+H |  |  |  |  |  |  |  | I |

FTE INFORMATION

|   |                                  |         |  |  |  |  |  |  |  |   |
|---|----------------------------------|---------|--|--|--|--|--|--|--|---|
| J | ADJUST BASE YR HRS WORKED / 2080 | RECORDS |  |  |  |  |  |  |  | J |
| K | BUDGET YR HRS WORKED / 2080      | BUDGET  |  |  |  |  |  |  |  | K |

PHYSICIANS PART B SERVICES

P2H

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|        | COL. 1                     | COL. 2                 | COL. 3                           | COL. 4 | COL. 5                    | COL. 6 | COL. 7                   |
|--------|----------------------------|------------------------|----------------------------------|--------|---------------------------|--------|--------------------------|
| SOURCE | REHABIL-<br>ITATION<br>RHB | ADULT<br>PSYCH.<br>PAD | CHILD/<br>ADOL.<br>PSYCH.<br>PCD |        | GERIATRIC<br>PSYCH<br>PSI |        | PSYCH<br>DAY CARE<br>PSD |

BASE YEAR DATA

|   |                                   |             |  |  |  |  |  |  |   |
|---|-----------------------------------|-------------|--|--|--|--|--|--|---|
| A | BASE YEAR EXPENSES                | SCH P1A,P1B |  |  |  |  |  |  | A |
| B | ALLOCATION FROM CAFE, PARKING,ETC | SCH OAE     |  |  |  |  |  |  | B |
| C | DONATED EXPENSES                  | RECORDS     |  |  |  |  |  |  | C |
| D | BASE YEAR EXPENSES ALLOCATED      | A+B+C       |  |  |  |  |  |  | D |

INFLATION FACTOR

|   |                  |       |  |  |  |  |  |  |   |
|---|------------------|-------|--|--|--|--|--|--|---|
| E | INFLATION FACTOR | HSCRC |  |  |  |  |  |  | E |
|---|------------------|-------|--|--|--|--|--|--|---|

BUDGET YEAR DATA

|   |                           |         |  |  |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|--|--|---|
| F | INFLATION                 | E x D   |  |  |  |  |  |  | F |
| G | NEW PROGRAM               | BUDGET  |  |  |  |  |  |  | G |
| H | MISCELLANEOUS ADJUSTMENTS | BUDGET  |  |  |  |  |  |  | H |
| I | BUDGET YEAR EXPENSES      | D+F+G+H |  |  |  |  |  |  | I |

FTE INFORMATION

|   |                                  |         |  |  |  |  |  |  |   |
|---|----------------------------------|---------|--|--|--|--|--|--|---|
| J | ADJUST BASE YR HRS WORKED / 2080 | RECORDS |  |  |  |  |  |  | J |
| K | BUDGET YR HRS WORKED / 2080      | BUDGET  |  |  |  |  |  |  | K |

020A



PHYSICIANS PART B SERVICES

P21

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

| SOURCE | COL. 1                    | COL. 2               | COL. 3                | COL. 4           | COL. 5                 | COL. 6                  | COL. 7         |
|--------|---------------------------|----------------------|-----------------------|------------------|------------------------|-------------------------|----------------|
|        | INDIVIDUAL THERAPY<br>ITH | GROUP THERAPY<br>GTH | PSYCH. TESTING<br>PST | EDUCATION<br>PSE | OTHER THERAPIES<br>OPT | ACTIVITY THERAPY<br>ATH | TOTAL EXPENSES |

BASE YEAR DATA

|   |                                   |             |  |  |  |  |  |  |   |
|---|-----------------------------------|-------------|--|--|--|--|--|--|---|
| A | BASE YEAR EXPENSES                | SCH P1A,P1B |  |  |  |  |  |  | A |
| B | ALLOCATION FROM CAFE, PARKING,ETC | SCH OAE     |  |  |  |  |  |  | B |
| C | DONATED EXPENSES                  | RECORDS     |  |  |  |  |  |  | C |
| D | BASE YEAR EXPENSES ALLOCATED      | A+B+C       |  |  |  |  |  |  | D |

INFLATION FACTOR

|   |                  |       |  |  |  |  |  |  |   |
|---|------------------|-------|--|--|--|--|--|--|---|
| E | INFLATION FACTOR | HSCRC |  |  |  |  |  |  | E |
|---|------------------|-------|--|--|--|--|--|--|---|

BUDGET YEAR DATA

|   |                           |         |  |  |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|--|--|---|
| F | INFLATION                 | E x D   |  |  |  |  |  |  | F |
| G | NEW PROGRAM               | BUDGET  |  |  |  |  |  |  | G |
| H | MISCELLANEOUS ADJUSTMENTS | BUDGET  |  |  |  |  |  |  | H |
| I | BUDGET YEAR EXPENSES      | D+F+G+H |  |  |  |  |  |  | I |

FTE INFORMATION

|   |                                  |         |  |  |  |  |  |  |   |
|---|----------------------------------|---------|--|--|--|--|--|--|---|
| J | ADJUST BASE YR HRS WORKED / 2080 | RECORDS |  |  |  |  |  |  | J |
| K | BUDGET YR HRS WORKED / 2080      | BUDGET  |  |  |  |  |  |  | K |

020B

## GENERAL SERVICE CENTERS

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

| FORM   |     | CENTER                          | UNIT OF MEASURE              | COL 1<br>UNITS | COL 2<br>WAGES,<br>SALARY &<br>BENEFITS | COL 3<br>OTHER<br>EXPENSES | COL 4<br>TOTAL<br>EXPENSES | COL 5<br>ALLOCATION TO AUX<br>ENTS, OIPS & UR'S | COL 6<br>ALLOCATED<br>EXPENSES | COL 7<br>ADJUSTED<br>TOTAL<br>EXPENSES | COL 8<br>EXPENSE PER<br>UNIT | COL 9<br>FTE'S |
|--------|-----|---------------------------------|------------------------------|----------------|---|----------------------------|----------------------------|---|--------------------------------|--|------------------------------|----------------|
| SOURCE |     |                                 |                              | RECORDS        | RECORDS                                 | RECORDS                    | Col. 2 + Col. 3            | RECORDS   | Sch. OADP                      | Col. 4 + Col. 5<br>+ Col. 6            | Col 6/Col. 1                 | RECORDS        |
| C1     | DTY | DIETARY SERVICES                | MEALS                        | 3,318          | 0.0                                     | 27.6                       | 27.6                       |   | 1.1                            | 28.7                                   | 0.00864                      | 0.0            |
| C2     | LL  | LAUNDRY & LINEN                 | POUNDS                       | 50,597         | 0.0                                     | 29.2                       | 29.2                       |   | 1.1                            | 30.4                                   | 0.00060                      | 0.0            |
| C3     | SSS | SOCIAL SERVICES                 | ADMISSIONS                   | 226            | 14.6                                    | 5.0                        | 19.6                       |   | 0.7                            | 20.3                                   | 0.08995                      | 0.2            |
| C4     | PUR | PURCHASING &<br>STORES          | EIPD                         | 4,988          | 82.3                                    | -39.6                      | 42.6                       |   | 1.6                            | 44.3                                   | 0.00888                      | 1.7            |
| C5     | POP | PLANT OPERATIONS                | SQ. FEET                     | 62,990         | 376.5                                   | 642.6                      | 1,019.1                    |   | 38.8                           | 1,057.9                                | 0.01679                      | 4.7            |
| C6     | HKP | HOUSEKEEPING                    | SQ. FEET                     | 53,542         | 281.8                                   | 59.2                       | 341.0                      |   | 13.0                           | 354.0                                  | 0.00661                      | 9.2            |
| C7     | CSS | CENTRAL SERVICES<br>& SUPPLY    | EIPA                         | 1,434          | 15.3                                    | 0.9                        | 16.2                       |   | 0.6                            | 16.8                                   | 0.01174                      | 0.7            |
| C8     | PHM | PHARMACY                        | EIPA                         | 1,434          | 184.6                                   | 15.5                       | 200.1                      |   | 7.6                            | 207.7                                  | 0.14481                      | 1.8            |
| C9     | FIS | GENERAL<br>ACCOUNTING           | EIPD                         | 4,988          | 107.8                                   | 131.5                      | 239.3                      |   | 9.1                            | 248.4                                  | 0.04980                      | 2.7            |
| C10    | PAC | PATIENT ACCOUNTS                | PAT. DAYS & OP<br>VISITS     | 13,954         | 469.8                                   | 634.7                      | 1,104.5                    |   | 42.1                           | 1,146.5                                | 0.08216                      | 6.7            |
| C11    | MGT | HOSPITAL<br>ADMINISTRATION      | EIPD                         | 4,988          | 834.4                                   | 385.1                      | 1,219.5                    |   | 46.4                           | 1,265.9                                | 0.25382                      | 4.3            |
| C12    | MRD | MEDICAL RECORDS                 | DISHCHARGES 1/8<br>OP VISITS | 1,872          | 161.4                                   | 109.4                      | 270.8                      |   | 10.3                           | 281.1                                  | 0.15016                      | 3.4            |
| C13    | MSA | MEDICAL STAFF<br>ADMINISTRATION | EIPD                         | 4,988          | 0.0                                     | 2.6                        | 2.6                        |   | 0.1                            | 2.6                                    | 0.00053                      | 0.0            |
| C14    | NAD | NURSING<br>ADMINISTRATION       | HOURS OF<br>PERSONNEL        | 103,279        | 152.1                                   | 132.6                      | 284.7                      |   | 10.8                           | 295.6                                  | 0.00286                      | 1.3            |
| C15    | OAO | ORGAN ACQUISITION<br>OVERHEAD   | NUMBER OF<br>PROCEDURES      |                |   |                            |                            |   |                                | 0.0                                    |                              |                |

## PATIENT CARE CENTERS

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

| FORM   |     | CENTER                             | COL 1<br>UNITS    | COL 2<br>WAGES,<br>SALARY &<br>BENEFITS | COL 3<br>PHYSICIAN<br>SUPERVISION<br>EXPENSES | COL 4<br>OTHER<br>EXPENSES | COL 5<br>TOTAL<br>EXPENSES  | COL 6<br>ALLOCATED<br>EXPENSES | COL 7<br>ADJUSTED<br>TOTAL<br>EXPENSES | COL 8<br>EXPENSE PER<br>UNIT | COL 9<br>FTE'S | COL 10<br>PHYSICIAN<br>SUPERVISION<br>FTE'S |
|--------|-----|------------------------------------|-------------------|---|---|----------------------------|-----------------------------|--------------------------------|--|------------------------------|----------------|---|
| SOURCE |     |                                    | RECORDS           | RECORDS                                 | RECORDS                                       | RECORDS                    | Col. 2 + Col. 3 +<br>Col. 4 | Sch. OADP                      | Col. 5 + Col. 6                        | Col. 7/Col. 1                | RECORDS        | RECORDS                                     |
| D1     | MSG | MEDICAL SURGICAL<br>ACUTE          | 786               | 540.5                                   | 31.8  | 50.0                       | 622.3                       | 23.7                           | 646.0                                  | 0.82183                      | 7.5            | 0.0   |
| D2     | PED | PEDIATRIC ACUTE                    | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D3     | PSY | PSYCHIATRIC ACUTE                  | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D4     | OBS | OBSTETRICS<br>DEFINITIVE           | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D5     | DEF | OBSERVATION                        | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D6     | MIS | MEDICAL SURGICAL<br>INTENSIVE CARE | 0                 | 0.0                                     | 0.0   | 0.0                        | 0.0                         | 0.0                            | 0.0                                    |                              | 0.0            | 0.0   |
| D7     | CCU | CORONARY CARE                      | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D8     | PIC | PEDIATRIC INTENSIVE<br>CARE        | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D9     | NEO | NEONATAL INTENSIVE<br>CARE         | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D10    | BUR | BURN CARE                          | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D11    | PSI | PSYCHIATRIC INTENSIVE<br>CARE      | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D12    | TRM | SHOCK TRAUMA                       | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D13    | ONC | ONCOLOGY                           | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D14    | NUR | NEWBORN NURSERY                    | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D15    | PRE | PREMATURE NURSERY                  | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D16    | ECF | SKILLED NURSING CARE               | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D17    | ICC | CHRONIC CARE                       | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D18    | EMG | EMERGENCY SERVICES                 | 44,678            | 1,201.5                                 | 768.0   | 129.1                      | 2,098.5                     | 79.9                           | 2,178.4                                | 0.04876                      | 11.9           | 0.0   |
| D19    | CL  | CLINIC SERVICES                    | 47,407            | 1,684.4                                 | 0.0   | 136.5                      | 1,820.9                     | 69.3                           | 1,890.2                                | 0.03987                      | 9.3            | 0.0   |
| D19A   | CLP | PRIMARY CARE CLINIC<br>SERVICES    | 0                 | 0.0                                     |   | 0.0                        | 0.0                         | 0.0                            | 0.0                                    |                              | 0.0            | 0.0   |
| D20    | PDC | PSYCH DAY/NIGHT CARE               | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D22    | SDS | SAME DAY SURGERY                   | 383               | 146.3                                   | 0.0   | 0.0                        | 146.3                       | 5.6                            | 151.8                                  | 0.39642                      | 1.2            | 0.0   |

PATIENT CARE CENTERS

INSTITUTION NAME Edward McCready Memorial Hospital

FISCAL YEAR 6/30/18

INSTITUTION NUMBER 0045

BUDGET YEAR 6/30/18

| FORM   |     | CENTER                        | COL 1<br>UNITS    | COL 2<br>WAGES,<br>SALARY &<br>BENEFITS | COL 3<br>PHYSICIAN<br>SUPERVISION<br>EXPENSES | COL 4<br>OTHER<br>EXPENSES | COL 5<br>TOTAL<br>EXPENSES  | COL 6<br>ALLOCATED<br>EXPENSES | COL 7<br>ADJUSTED<br>TOTAL<br>EXPENSES | COL 8<br>EXPENSE PER<br>UNIT | COL 9<br>FTE'S | COL 10<br>PHYSICIAN<br>SUPERVISION<br>FTE'S |
|--------|-----|-------------------------------|-------------------|---|---|----------------------------|-----------------------------|--------------------------------|--|------------------------------|----------------|---|
| SOURCE |     |                               | RECORDS           | RECORDS                                 | RECORDS                                       | RECORDS                    | Col. 2 + Col. 3 +<br>Col. 4 | Sch. OADP                      | Col. 5 + Col. 6                        | Col. 7/Col. 1                | RECORDS        | RECORDS                                     |
| D23    | DEL | LABOR & DELIVERY              | NOT<br>APPLICABLE |   |   |                            | 0.0                         |                                | 0.0                                    |                              |                |   |
| D24    | OR  | OPERATING ROOM                | 16,941            | 128.4                                   | 0.9   | 62.7                       | 191.9                       | 7.3                            | 199.3                                  | 0.01176                      | 1.0            | 0.0   |
| D24A   | ORC | OPERATING ROOM<br>CLINIC      | 1,268             | 28.6                                    |   | 7.7                        | 36.3                        | 1.4                            | 37.7                                   | 0.02971                      | 0.2            | 0.0   |
| D25    | ANS | ANESTHESIOLOGY                | 21,419            | 277.8                                   | 0.0   | 26.9                       | 304.7                       | 11.6                           | 316.3                                  | 0.01477                      | 0.6            | 0.0   |
| D26    | MSS | MEDICAL SUPPLIES SOLD         | 1,434             |   |   | 344.3                      | 344.3                       |                                | 344.3                                  | 0.24007                      |                |   |
| D27    | CDS | DRUGS SOLD                    | 1,434             |   |   | 646.8                      | 646.8                       |                                | 646.8                                  | 0.45103                      |                |   |
| D28    | LAB | LABORATORY SERVICES           | 653,229           | 439.7                                   | 34.2  | 706.7                      | 1,180.6                     | 44.9                           | 1,225.5                                | 0.00188                      | 6.3            | 0.0   |
| D30    | EKG | ELECTROCARDIO-<br>GRAPHY      | 32,542            | 48.7                                    | 0.0   | 2.2                        | 50.9                        | 1.9                            | 52.9                                   | 0.00163                      | 0.6            | 0.0   |
| D31    | IRC | INTERVENTIONAL<br>RAD/CARDIO  | 224               | 0.0                                     | 0.0   | 0.0                        | 0.0                         | 0.0                            | 0.0                                    | 0.00000                      | 0.0            | 0.0   |
| D32    | RAD | RADIOLOGY DIAGNOSTIC          | 55,082            | 448.3                                   | 0.0   | 189.0                      | 637.3                       | 24.3                           | 661.6                                  | 0.01201                      | 4.6            | 0.0   |
| D33    | CAT | CT SCANNER                    | 70,540            | 47.0                                    | 0.0   | 100.5                      | 147.4                       | 5.6                            | 153.1                                  | 0.00217                      | 0.7            | 0.0   |
| D34    | RAT | RADIOLOGY-<br>THERAPEUTIC     | 0                 | 0.0                                     | 0.0   | 0.0                        | 0.0                         | 0.0                            | 0.0                                    |                              | 0.0            | 0.0   |
| D35    | NUC | NUCLEAR MEDICINE              | 0                 | 0.0                                     |   | 0.0                        | 0.0                         | 0.0                            | 0.0                                    |                              | 0.0            | 0.0   |
| D36    | RES | RESPIRATORY THERAPY           | 96,812            | 86.6                                    | 0.0   | 96.8                       | 183.4                       | 7.0                            | 190.4                                  | 0.00197                      | 1.3            | 0.0   |
| D37    | PUL | PULMONARY FUNCTION<br>TESTING | 0                 | 0.0                                     |   | 0.0                        | 0.0                         | 0.0                            | 0.0                                    |                              | 0.0            | 0.0   |
| D38    | EEG | ELECTROENCEPHALO-<br>GRAPHY   | 0                 | 0.0                                     |   | 0.0                        | 0.0                         | 0.0                            | 0.0                                    |                              | 0.0            | 0.0   |
| D39    | PTH | PHYSICAL THERAPY              | 51,703            | 207.0                                   | 0.0   | 90.1                       | 297.2                       | 11.3                           | 308.5                                  | 0.00597                      | 1.8            | 0.0   |
| D40    | OTH | OCCUPATIONAL<br>THERAPY       | 7,360             | 39.1                                    | 0.0   | 0.1                        | 39.3                        | 0.0                            | 39.3                                   | 0.00533                      | 0.4            | 0.0   |
| D41    | STH | SPEECH LANGUAGE<br>THERAPY    | 2,021             | 13.9                                    | 0.0   | 10.5                       | 24.5                        | 0.0                            | 24.5                                   | 0.01210                      | 0.1            | 0.0   |
| D42    | REC | RECREATIONAL<br>THERAPY       | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D43    | AUD | AUDIOLOGY                     | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D44    | OPM | OTHER PHYSICAL<br>MEDICINE    | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D45    | RDL | RENAL DIALYSIS                | 0                 | 0.0                                     | 0.0   | 0.0                        | 0.0                         | 0.0                            | 0.0                                    |                              | 0.0            | 0.0   |

## PATIENT CARE CENTERS

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

| FORM   |     | CENTER                           | COL 1<br>UNITS    | COL 2<br>WAGES,<br>SALARY &<br>BENEFITS | COL 3<br>PHYSICIAN<br>SUPERVISION<br>EXPENSES | COL 4<br>OTHER<br>EXPENSES | COL 5<br>TOTAL<br>EXPENSES  | COL 6<br>ALLOCATED<br>EXPENSES | COL 7<br>ADJUSTED<br>TOTAL<br>EXPENSES | COL 8<br>EXPENSE PER<br>UNIT | COL 9<br>FTE'S | COL 10<br>PHYSICIAN<br>SUPERVISION<br>FTE'S |
|--------|-----|----------------------------------|-------------------|---|---|----------------------------|-----------------------------|--------------------------------|--|------------------------------|----------------|---|
| SOURCE |     |                                  | RECORDS           | RECORDS                                 | RECORDS                                       | RECORDS                    | Col. 2 + Col. 3 +<br>Col. 4 | Sch. OADP                      | Col. 5 + Col. 6                        | Col. 7/Col. 1                | RECORDS        | RECORDS                                     |
| D46    | OA  | ORGAN ACQUISITION                | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D47    | AOR | AMBULATORY SURGERY<br>SERVICES   | NOT<br>APPLICABLE |   |   |                            | 0.0                         |                                | 0.0                                    |                              |                |   |
| D48    | LEU | LEUKOPHERESIS                    | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D49    | HYP | HYPERBARIC CHAMBER               | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D50    | FSE | FREE STANDING<br>EMERGENCY       | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D51    | MRI | MAGNETIC RESONANCE<br>IMAGING    | 176               | 0.0                                     | 3.9   | 0.0                        | 3.9                         | 0.1                            | 4.0                                    | 0.02280                      | 0.0            | 0.0   |
| D53    | LIT | LITHOTRIPSY                      | 0                 | 0.0                                     | 0.0   | 0.0                        | 0.0                         | 0.0                            | 0.0                                    |                              | 0.0            | 0.0   |
| D54    | RHB | REHABILITATION                   | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D55    | OBV | OBSERVATION                      | 4,799             | 168.2                                   |   | 76.7                       | 244.9                       | 9.3                            | 254.2                                  | 0.05297                      | 2.4            | 0.0   |
| D56    | AMR | AMBULANCE SERVICES<br>REBUNDLED  | 6,003             | 0.0                                     |   | 54.3                       | 54.3                        | 2.1                            | 56.3                                   | 0.00938                      | 0.0            | 0.0   |
| D57    | TMT | MICROWAVE THERMO<br>THERAPY      | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D58    | OCL | ONCOLOGY CLINIC                  | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D59    | TNA | TRANSURETHRAL<br>NEEDLE ABLATION | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D70    | PAD | PSYCH, ADULT                     | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D71    | PCD | PSYCH,<br>CHILD/ADOLESCENT       | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D73    | PSG | PSYCH, GERIATRIC                 | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D74    | ITH | INDIVIDUAL THERAPIES             | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D75    | GTH | GROUP THERAPIES                  | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D76    | FTH | FAMILY THERAPIES                 | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D77    | PST | PSYCHOLOGICAL<br>TESTING         | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D78    | PSE | EDUCATION                        | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D79    | OPT | OTHER THERAPIES                  | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D80    | ETH | ELECTRO-CONVULSIVE<br>THERAPY    | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |
| D81    | ATH | ACTIVITY THERAPY                 | NOT<br>APPLICABLE |   |   |                            | 0.0                         | 0.0                            | 0.0                                    |                              |                |   |

AUXILIARY ENTERPRISES  
AMB

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|   | VOLUME DATA  | BASE YEAR UNITS | BUDGET YEAR UNITS |
|---|--------------|-----------------|-------------------|
| A | OCC. SERVICE | 0               | 0                 |

AMBULANCE SERVICES - 6950  
3950

|        | COL. 1                             | COL. 2         | COL. 3                  | COL. 4                     |
|--------|------------------------------------|----------------|-------------------------|----------------------------|
| SOURCE | WAGES, SALAR-IES & FRINGE BENEFITS | OTHER EXPENSES | TOTAL EXPENSES, REVENUE | EXPENSES, REVENUE PER UNIT |

BASE YEAR DATA

|   |                             |         |     |     |     |     |   |
|---|-----------------------------|---------|-----|-----|-----|-----|---|
| B | BASE YEAR EXPENSES          | RECORDS | 0   | 0   | 0   | XXX | B |
| C | ALLOC FROM CAFE, PARK, ETC  | SCH OAC |     | XXX | 0   | XXX | C |
| D | ALLOC FROM GEN SERV CENTERS | ////    | XXX | XXX | XXX | XXX | D |

COL. 5  
COST CENTER

COL. 6  
CODE

|    |                              |           |     |     |   |         |    |
|----|------------------------------|-----------|-----|-----|---|---------|----|
| D1 |                              |           |     |     | 0 | XXX     | D1 |
| D2 |                              |           |     |     | 0 | XXX     | D2 |
| D3 |                              |           |     |     | 0 | XXX     | D3 |
| D4 |                              |           |     |     | 0 | XXX     | D4 |
| D5 |                              |           |     |     | 0 | XXX     | D5 |
| D6 |                              |           |     |     | 0 | XXX     | D6 |
| E  | CAPITAL FACILITIES ALLOWANCE | SCH H3    | XXX | 0.0 | 0 | XXX     | E  |
| F  | DONATED SERV & COMMODITIES   | RECORDS   |     |     | 0 | XXX     | F  |
| G  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E+F | 0   | 0   | 0 | #DIV/0! | G  |

BASE YEAR PROFIT (LOSS)

|   |                       |         |     |     |   |     |   |
|---|-----------------------|---------|-----|-----|---|-----|---|
| H | BASE YEAR REVENUE     | RECORDS | XXX | XXX |   | XXX | H |
| I | PROFIT (LOSS)         | H-G     | XXX | XXX | 0 | XXX | I |
| J | AMT TREATED AS FRINGE | RECORDS | XXX | XXX |   | XXX | J |
| K | AMT TREATED AS OFC    | I-J     | XXX | XXX | 0 | XXX | K |

BUDGET YEAR DATA

|   |                      |        |   |   |   |     |   |
|---|----------------------|--------|---|---|---|-----|---|
| L | INFLATION            | HSCRC  |   |   |   | XXX | L |
| M | MISC ADJUSTMENTS     | BUDGET |   |   |   | XXX | M |
| N | BUDGET YEAR EXPENSES | G+L+M  | 0 | 0 | 0 |     | N |

BUDGET YR PROFIT (LOSS)

|   |                     |         |     |     |   |     |   |
|---|---------------------|---------|-----|-----|---|-----|---|
| O | BASE YEAR REVENUE   | RECORDS | XXX | XXX | 0 | XXX | O |
| P | ADJUSTMENTS         | BUDGET  | XXX | XXX |   | XXX | P |
| Q | BUDGET YEAR REVENUE | O+P     | XXX | XXX | 0 | XXX | Q |
| R | PROFIT (LOSS)       | Q-N     | XXX | XXX | 0 | XXX | R |

FTE DATA

|   |                           |         |   |  |  |  |   |
|---|---------------------------|---------|---|--|--|--|---|
| S | BASE YR HRS WORKED/2080   | RECORDS | 0 |  |  |  | S |
| T | BUDGET YR HRS WORKED/2080 | BUDGET  |   |  |  |  | T |

AUXILIARY ENTERPRISES

PAR

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YEAR UNITS | BUDGET YEAR UNITS |
|---|-------------|-----------------|-------------------|
| A | # OF SPACES | 0               | 0                 |

PARKING - 8440  
 5440

|        | COL. 1                                    | COL. 2            | COL. 3                        | COL. 4                           |
|--------|---|-------------------|-------------------------------|----------------------------------|
| SOURCE | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES,<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |

BASE YEAR DATA

|   |                             |         |     |     |     |     |   |
|---|-----------------------------|---------|-----|-----|-----|-----|---|
| B | BASE YEAR EXPENSES          | RECORDS | 0   | 0   | 0   | XXX | B |
| C | ALLOC FROM CAFE, PARK, ETC  | SCH OAC |     | XXX | 0   | XXX | C |
| D | ALLOC FROM GEN SERV CENTERS | ////    | XXX | XXX | XXX | XXX | D |

COL. 5 COL. 6  
 COST CENTER CODE

|    |                              |           |     |     |   |         |    |
|----|------------------------------|-----------|-----|-----|---|---------|----|
| D1 |                              |           |     |     | 0 | XXX     | D1 |
| D2 |                              |           |     |     | 0 | XXX     | D2 |
| D3 |                              |           |     |     | 0 | XXX     | D3 |
| D4 |                              |           |     |     | 0 | XXX     | D4 |
| D5 |                              |           |     |     | 0 | XXX     | D5 |
| D6 |                              |           |     |     | 0 | XXX     | D6 |
| E  | CAPITAL FACILITIES ALLOWANCE | SCH H3    | XXX | 0.0 | 0 | XXX     | E  |
| F  | DONATED SERV & COMMODITIES   | RECORDS   |     |     | 0 | XXX     | F  |
| G  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E+F | 0   | 0   | 0 | #DIV/0! | G  |

BASE YEAR PROFIT (LOSS)

|   |                       |         |     |     |   |     |   |
|---|-----------------------|---------|-----|-----|---|-----|---|
| H | BASE YEAR REVENUE     | RECORDS | XXX | XXX |   | XXX | H |
| I | PROFIT (LOSS)         | H-G     | XXX | XXX | 0 | XXX | I |
| J | AMT TREATED AS FRINGE | RECORDS | XXX | XXX |   | XXX | J |
| K | AMT TREATED AS OFC    | I-J     | XXX | XXX | 0 | XXX | K |

BUDGET YEAR DATA

|   |                      |        |   |   |   |     |   |
|---|----------------------|--------|---|---|---|-----|---|
| L | INFLATION            | HSCRC  |   |   |   | XXX | L |
| M | MISC ADJUSTMENTS     | BUDGET |   |   |   | XXX | M |
| N | BUDGET YEAR EXPENSES | G+L+M  | 0 | 0 | 0 |     | N |

BUDGET YR PROFIT (LOSS)

|   |                     |         |     |     |   |     |   |
|---|---------------------|---------|-----|-----|---|-----|---|
| O | BASE YEAR REVENUE   | RECORDS | XXX | XXX | 0 | XXX | O |
| P | ADJUSTMENTS         | BUDGET  | XXX | XXX |   | XXX | P |
| Q | BUDGET YEAR REVENUE | O+P     | XXX | XXX | 0 | XXX | Q |
| R | PROFIT (LOSS)       | Q-N     | XXX | XXX | 0 | XXX | R |

FTE DATA

|   |                           |         |   |  |  |  |   |
|---|---------------------------|---------|---|--|--|--|---|
| S | BASE YR HRS WORKED/2080   | RECORDS | 0 |  |  |  | S |
| T | BUDGET YR HRS WORKED/2080 | BUDGET  |   |  |  |  | T |

AUXILIARY ENTERPRISES

DPO

INSTITUTION NAME Edward McCreehy Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YEAR UNITS | BUDGET YEAR UNITS |
|---|-------------|-----------------|-------------------|
| A | SQ. FEET    | 0               | 0                 |

DOCTOR'S PRIVATE OFFICE RENTAL - 9210  
 9110

|        | COL. 1                                    | COL. 2            | COL. 3                        | COL. 4                           |
|--------|---|-------------------|-------------------------------|----------------------------------|
| SOURCE | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES,<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |

BASE YEAR DATA

|   |                             |         |     |     |     |     |   |
|---|-----------------------------|---------|-----|-----|-----|-----|---|
| B | BASE YEAR EXPENSES          | RECORDS | 0   | 0   | 0   | XXX | B |
| C | ALLOC FROM CAFE, PARK, ETC  | SCH OAC |     | XXX | 0   | XXX | C |
| D | ALLOC FROM GEN SERV CENTERS | ////    | XXX | XXX | XXX | XXX | D |

COL. 5 COL. 6  
 COST CENTER CODE

|    |                              |           |     |     |   |         |    |
|----|------------------------------|-----------|-----|-----|---|---------|----|
| D1 |                              |           |     |     | 0 | XXX     | D1 |
| D2 |                              |           |     |     | 0 | XXX     | D2 |
| D3 |                              |           |     |     | 0 | XXX     | D3 |
| D4 |                              |           |     |     | 0 | XXX     | D4 |
| D5 |                              |           |     |     | 0 | XXX     | D5 |
| D6 |                              |           |     |     | 0 | XXX     | D6 |
| E  | CAPITAL FACILITIES ALLOWANCE | SCH H3    | XXX | 0.0 | 0 | XXX     | E  |
| F  | DONATED SERV & COMMODITIES   | RECORDS   |     |     | 0 | XXX     | F  |
| G  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E+F | 0   | 0   | 0 | #DIV/0! | G  |

BASE YEAR PROFIT (LOSS)

|   |                       |         |     |     |   |     |   |
|---|-----------------------|---------|-----|-----|---|-----|---|
| H | BASE YEAR REVENUE     | RECORDS | XXX | XXX |   | XXX | H |
| I | PROFIT (LOSS)         | H-G     | XXX | XXX | 0 | XXX | I |
| J | AMT TREATED AS FRINGE | RECORDS | XXX | XXX |   | XXX | J |
| K | AMT TREATED AS OFC    | I-J     | XXX | XXX | 0 | XXX | K |

BUDGET YEAR DATA

|   |                      |        |   |   |   |     |   |
|---|----------------------|--------|---|---|---|-----|---|
| L | INFLATION            | HSCRC  |   |   |   | XXX | L |
| M | MISC ADJUSTMENTS     | BUDGET |   |   |   | XXX | M |
| N | BUDGET YEAR EXPENSES | G+L+M  | 0 | 0 | 0 |     | N |

BUDGET YR PROFIT (LOSS)

|   |                     |         |     |     |   |     |   |
|---|---------------------|---------|-----|-----|---|-----|---|
| O | BASE YEAR REVENUE   | RECORDS | XXX | XXX | 0 | XXX | O |
| P | ADJUSTMENTS         | BUDGET  | XXX | XXX |   | XXX | P |
| Q | BUDGET YEAR REVENUE | O+P     | XXX | XXX | 0 | XXX | Q |
| R | PROFIT (LOSS)       | Q-N     | XXX | XXX | 0 | XXX | R |

FTE DATA

|   |                           |         |   |  |  |  |   |
|---|---------------------------|---------|---|--|--|--|---|
| S | BASE YR HRS WORKED/2080   | RECORDS | 0 |  |  |  | S |
| T | BUDGET YR HRS WORKED/2080 | BUDGET  |   |  |  |  | T |



AUXILLARY ENTERPRISES  
 OOR

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YEAR UNITS | BUDGET YEAR UNITS |
|---|-------------|-----------------|-------------------|
| A | SQ. FEET    | 0               | 0                 |

OFFICE & OTHER RENTAL - 9220  
 9210

|        | COL. 1                                    | COL. 2            | COL. 3                        | COL. 4                           |
|--------|---|-------------------|-------------------------------|----------------------------------|
| SOURCE | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES,<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |

BASE YEAR DATA

|   |                             |         |     |     |     |     |   |
|---|-----------------------------|---------|-----|-----|-----|-----|---|
| B | BASE YEAR EXPENSES          | RECORDS | 0.0 | 0.0 | 0.0 | XXX | B |
| C | ALLOC FROM CAFE, PARK, ETC  | SCH OAC |     | XXX | 0.0 | XXX | C |
| D | ALLOC FROM GEN SERV CENTERS | ////    | XXX | XXX | XXX | XXX | D |

COL. 5 COL. 6  
 COST CENTER CODE

|    |                              |           |     |     |     |         |    |
|----|------------------------------|-----------|-----|-----|-----|---------|----|
| D1 |                              |           |     |     |     | XXX     | D1 |
| D2 |                              |           |     |     |     | XXX     | D2 |
| D3 |                              |           |     |     | 0.0 | XXX     | D3 |
| D4 |                              |           |     |     | 0.0 | XXX     | D4 |
| D5 |                              |           |     |     | 0.0 | XXX     | D5 |
| D6 |                              |           |     |     | 0.0 | XXX     | D6 |
| E  | CAPITAL FACILITIES ALLOWANCE | SCH H3    | XXX | 0.0 | 0.0 | XXX     | E  |
| F  | DONATED SERV & COMMODITIES   | RECORDS   |     |     | 0.0 | XXX     | F  |
| G  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E+F | 0.0 | 0.0 | 0.0 | #DIV/0! | G  |

BASE YEAR PROFIT (LOSS)

|   |                       |         |     |     |     |     |   |
|---|-----------------------|---------|-----|-----|-----|-----|---|
| H | BASE YEAR REVENUE     | RECORDS | XXX | XXX | 0.0 | XXX | H |
| I | PROFIT (LOSS)         | H-G     | XXX | XXX | 0.0 | XXX | I |
| J | AMT TREATED AS FRINGE | RECORDS | XXX | XXX |     | XXX | J |
| K | AMT TREATED AS OFC    | I-J     | XXX | XXX | 0.0 | XXX | K |

BUDGET YEAR DATA

|   |                      |        |     |     |     |     |   |
|---|----------------------|--------|-----|-----|-----|-----|---|
| L | INFLATION            | HSCRC  |     |     |     | XXX | L |
| M | MISC ADJUSTMENTS     | BUDGET |     |     |     | XXX | M |
| N | BUDGET YEAR EXPENSES | G+L+M  | 0.0 | 0.0 | 0.0 |     | N |

BUDGET YR PROFIT (LOSS)

|   |                     |         |     |     |     |     |   |
|---|---------------------|---------|-----|-----|-----|-----|---|
| O | BASE YEAR REVENUE   | RECORDS | XXX | XXX | 0.0 | XXX | O |
| P | ADJUSTMENTS         | BUDGET  | XXX | XXX |     | XXX | P |
| Q | BUDGET YEAR REVENUE | O+P     | XXX | XXX | 0.0 | XXX | Q |
| R | PROFIT (LOSS)       | Q-N     | XXX | XXX | 0.0 | XXX | R |

FTE DATA

|   |                           |         |     |  |  |  |   |
|---|---------------------------|---------|-----|--|--|--|---|
| S | BASE YR HRS WORKED/2080   | RECORDS | 0.0 |  |  |  | S |
| T | BUDGET YR HRS WORKED/2080 | BUDGET  |     |  |  |  | T |

AUXILIARY ENTERPRISES

REO

INSTITUTION NAME Edward McCreedy Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YEAR UNITS | BUDGET YEAR UNITS |
|---|-------------|-----------------|-------------------|
| A | SQ. FEET    | 0               | 0                 |

RETAIL OPERATIONS - 9230  
 9130

|        | COL. 1                                    | COL. 2            | COL. 3                        | COL. 4                           |
|--------|---|-------------------|-------------------------------|----------------------------------|
| SOURCE | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES,<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |

BASE YEAR DATA

|   |                             |         |     |     |     |     |   |
|---|-----------------------------|---------|-----|-----|-----|-----|---|
| B | BASE YEAR EXPENSES          | RECORDS | 0.0 | 0.0 | 0.0 | XXX | B |
| C | ALLOC FROM CAFE, PARK, ETC  | SCH OAC | 0.0 | XXX | 0.0 | XXX | C |
| D | ALLOC FROM GEN SERV CENTERS | ////    | XXX | XXX | XXX | XXX | D |

COL. 5 COL. 6  
 COST CENTER CODE

|    |                              |           |     |     |     |         |    |
|----|------------------------------|-----------|-----|-----|-----|---------|----|
| D1 |                              |           |     |     |     | XXX     | D1 |
| D2 |                              |           |     |     | 0.0 | XXX     | D2 |
| D3 |                              |           |     |     | 0.0 | XXX     | D3 |
| D4 |                              |           |     |     | 0.0 | XXX     | D4 |
| D5 |                              |           |     |     | 0.0 | XXX     | D5 |
| D6 |                              |           |     |     | 0.0 | XXX     | D6 |
| E  | CAPITAL FACILITIES ALLOWANCE | SCH H3    | XXX | 0.0 | 0.0 | XXX     | E  |
| F  | DONATED SERV & COMMODITIES   | RECORDS   |     |     | 0.0 | XXX     | F  |
| G  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E+F | 0.0 | 0.0 | 0.0 | #DIV/0! | G  |

BASE YEAR PROFIT (LOSS)

|   |                       |         |     |     |     |     |   |
|---|-----------------------|---------|-----|-----|-----|-----|---|
| H | BASE YEAR REVENUE     | RECORDS | XXX | XXX |     | XXX | H |
| I | PROFIT (LOSS)         | H-G     | XXX | XXX | 0.0 | XXX | I |
| J | AMT TREATED AS FRINGE | RECORDS | XXX | XXX |     | XXX | J |
| K | AMT TREATED AS OFC    | I-J     | XXX | XXX | 0.0 | XXX | K |

BUDGET YEAR DATA

|   |                      |        |  |  |  |     |   |
|---|----------------------|--------|--|--|--|-----|---|
| L | INFLATION            | HSCRC  |  |  |  | XXX | L |
| M | MISC ADJUSTMENTS     | BUDGET |  |  |  | XXX | M |
| N | BUDGET YEAR EXPENSES | G+L+M  |  |  |  |     | N |

BUDGET YR PROFIT (LOSS)

|   |                     |         |     |     |     |     |   |
|---|---------------------|---------|-----|-----|-----|-----|---|
| O | BASE YEAR REVENUE   | RECORDS | XXX | XXX |     | XXX | O |
| P | ADJUSTMENTS         | BUDGET  | XXX | XXX |     | XXX | P |
| Q | BUDGET YEAR REVENUE | O+P     | XXX | XXX | 0.0 | XXX | Q |
| R | PROFIT (LOSS)       | Q-N     | XXX | XXX | 0.0 | XXX | R |

FTE DATA

|   |                           |         |     |  |  |  |   |
|---|---------------------------|---------|-----|--|--|--|---|
| S | BASE YR HRS WORKED/2080   | RECORDS | 0.0 |  |  |  | S |
| T | BUDGET YR HRS WORKED/2080 | BUDGET  |     |  |  |  | T |

## AUXILIARY ENTERPRISES

PTE

INSTITUTION NAME Edward McCreedy Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YEAR UNITS | BUDGET YEAR UNITS |
|---|-------------|-----------------|-------------------|
| A | # OF PHONES | 0               | 0                 |

PATIENT TELEPHONES - 8615  
 5610

|        | COL. 1                                    | COL. 2            | COL. 3                        | COL. 4                           |
|--------|---|-------------------|-------------------------------|----------------------------------|
| SOURCE | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES,<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |

## BASE YEAR DATA

|   |                             |         |     |     |     |     |   |
|---|-----------------------------|---------|-----|-----|-----|-----|---|
| B | BASE YEAR EXPENSES          | RECORDS | 0.0 | 0.0 | 0.0 | XXX | B |
| C | ALLOC FROM CAFE, PARK, ETC  | SCH OAC | 0.0 | XXX | 0.0 | XXX | C |
| D | ALLOC FROM GEN SERV CENTERS | ////    | XXX | XXX | XXX | XXX | D |

COL. 5 COL. 6

COST CENTER CODE

|    |                              |           |      |     |     |         |     |    |
|----|------------------------------|-----------|------|-----|-----|---------|-----|----|
| D1 | Data Processing              | EDP       | OADP | 0.0 | 0.0 | 0.0     | XXX | D1 |
| D2 |                              |           |      |     |     | 0.0     | XXX | D2 |
| D3 |                              |           |      |     |     | 0.0     | XXX | D3 |
| D4 |                              |           |      |     |     | 0.0     | XXX | D4 |
| D5 |                              |           |      |     |     | 0.0     | XXX | D5 |
| D6 |                              |           |      |     |     | 0.0     | XXX | D6 |
| E  | CAPITAL FACILITIES ALLOWANCE | SCH H3    | XXX  | 0.0 | 0.0 | XXX     | E   |    |
| F  | DONATED SERV & COMMODITIES   | RECORDS   |      |     | 0.0 | XXX     | F   |    |
| G  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E+F | 0.0  | 0.0 | 0.0 | #DIV/0! | G   |    |

## BASE YEAR PROFIT (LOSS)

|   |                       |         |     |     |     |     |   |
|---|-----------------------|---------|-----|-----|-----|-----|---|
| H | BASE YEAR REVENUE     | RECORDS | XXX | XXX | 0.0 | XXX | H |
| I | PROFIT (LOSS)         | H-G     | XXX | XXX | 0.0 | XXX | I |
| J | AMT TREATED AS FRINGE | RECORDS | XXX | XXX |     | XXX | J |
| K | AMT TREATED AS OFC    | I-J     | XXX | XXX | 0.0 | XXX | K |

## BUDGET YEAR DATA

|   |                      |        |  |  |  |     |   |
|---|----------------------|--------|--|--|--|-----|---|
| L | INFLATION            | HSCRC  |  |  |  | XXX | L |
| M | MISC ADJUSTMENTS     | BUDGET |  |  |  | XXX | M |
| N | BUDGET YEAR EXPENSES | G+L+M  |  |  |  |     | N |

## BUDGET YR PROFIT (LOSS)

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

## FTE DATA

|   |                           |         |     |  |  |  |   |
|---|---------------------------|---------|-----|--|--|--|---|
| S | BASE YR HRS WORKED/2080   | RECORDS | 0.0 |  |  |  | S |
| T | BUDGET YR HRS WORKED/2080 | BUDGET  |     |  |  |  | T |

AUXILIARY ENTERPRISES

CAF

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YEAR UNITS | BUDGET YEAR UNITS |
|---|-------------|-----------------|-------------------|
| A | MEALS       |                 | 0                 |

CAFETERIA - 8320

|        | COL. 1                                    | COL. 2            | COL. 3                        | COL. 4                           |
|--------|---|-------------------|-------------------------------|----------------------------------|
| SOURCE | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES,<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |

BASE YEAR DATA

|   |                             |         |     |     |     |     |   |
|---|-----------------------------|---------|-----|-----|-----|-----|---|
| B | BASE YEAR EXPENSES          | RECORDS | 0.0 | 0.0 | 0.0 | XXX | B |
| C | ALLOC FROM CAFE, PARK, ETC  | SCH OAC |     | XXX | 0   | XXX | C |
| D | ALLOC FROM GEN SERV CENTERS | ////    | XXX | XXX | XXX | XXX | D |

COL. 5 COL. 6  
 COST CENTER CODE

|    |                              |           |     |     |     |         |    |
|----|------------------------------|-----------|-----|-----|-----|---------|----|
| D1 |                              |           |     |     |     | XXX     | D1 |
| D2 |                              |           |     |     |     | XXX     | D2 |
| D3 |                              |           |     |     |     | XXX     | D3 |
| D4 |                              |           |     |     |     | XXX     | D4 |
| D5 |                              |           |     |     |     | XXX     | D5 |
| D6 |                              |           |     |     |     | XXX     | D6 |
| E  | CAPITAL FACILITIES ALLOWANCE | SCH H3    | XXX | 0.0 | 0.0 | XXX     | E  |
| F  | DONATED SERV & COMMODITIES   | RECORDS   |     |     | 0   | XXX     | F  |
| G  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E+F | 0.0 | 0.0 | 0.0 | #DIV/0! | G  |

BASE YEAR PROFIT (LOSS)

|   |                       |         |     |     |     |     |   |
|---|-----------------------|---------|-----|-----|-----|-----|---|
| H | BASE YEAR REVENUE     | RECORDS | XXX | XXX |     | XXX | H |
| I | PROFIT (LOSS)         | H-G     | XXX | XXX | 0.0 | XXX | I |
| J | AMT TREATED AS FRINGE | RECORDS | XXX | XXX | 0.0 | XXX | J |
| K | AMT TREATED AS OFC    | I-J     | XXX | XXX |     | XXX | K |

BUDGET YEAR DATA

|   |                      |        |  |  |  |     |   |
|---|----------------------|--------|--|--|--|-----|---|
| L | INFLATION            | HSCRC  |  |  |  | XXX | L |
| M | MISC ADJUSTMENTS     | BUDGET |  |  |  | XXX | M |
| N | BUDGET YEAR EXPENSES | G+L+M  |  |  |  |     | N |

BUDGET YR PROFIT (LOSS)

|   |                     |         |     |     |     |     |   |
|---|---------------------|---------|-----|-----|-----|-----|---|
| O | BASE YEAR REVENUE   | RECORDS | XXX | XXX |     | XXX | O |
| P | ADJUSTMENTS         | BUDGET  | XXX | XXX |     | XXX | P |
| Q | BUDGET YEAR REVENUE | O+P     | XXX | XXX | 0   | XXX | Q |
| R | PROFIT (LOSS)       | Q-N     | XXX | XXX | 0.0 | XXX | R |

FTE DATA

|   |                           |         |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|---|
| S | BASE YR HRS WORKED/2080   | RECORDS |  |  |  |  | S |
| T | BUDGET YR HRS WORKED/2080 | BUDGET  |  |  |  |  | T |





OTHER INSTITUTIONAL PROGRAMS  
REG

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|                 | VOLUME DATA | BASE YEAR UNITS | BUDGET YEAR UNITS |
|-----------------|-------------|-----------------|-------------------|
| A               | # PROJECTS  | 0               | 0                 |
| RESEARCH - 8010 |             |                 |                   |

|                         |                              | COL. 1         | COL. 2                                    | COL. 3            | COL. 4                        |                                  |
|-------------------------|------------------------------|----------------|---|-------------------|-------------------------------|----------------------------------|
|                         |                              | SOURCE         | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES,<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |
| BASE YEAR DATA          |                              |                |   |                   |                               |                                  |
| B                       | BASE YEAR EXPENSES           | RECORDS        | 0   | 0                 | 0                             | XXX                              |
| C                       | ALLOC FROM CAFE, PARK, ETC   | SCH OAC        | 0   | XXX               | 0                             | XXX                              |
| D                       | ALLOC FROM GEN SERV CENTERS  | ////           | XXX                                       | XXX               | XXX                           | XXX                              |
|                         | COL. 5<br>COST CENTER        | COL. 6<br>CODE | ////                                      | XXX               | XXX                           | XXX                              |
| D1                      |                              |                |   |                   | 0                             | XXX                              |
| D2                      |                              |                |   |                   | 0                             | XXX                              |
| D3                      |                              |                |   |                   | 0                             | XXX                              |
| D4                      |                              |                |   |                   | 0                             | XXX                              |
| D5                      |                              |                |   |                   | 0                             | XXX                              |
| D6                      |                              |                |   |                   | 0                             | XXX                              |
| E                       | CAPITAL FACILITIES ALLOWANCE | SCH H3         | XXX                                       | XXX               |                               | XXX                              |
| F                       | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E        | 0   | 0                 | 0                             | #DIV/0!                          |
| BASE YEAR PROFIT (LOSS) |                              |                |   |                   |                               |                                  |
| G                       | BASE YEAR REVENUE            | RECORDS        | XXX                                       | XXX               |                               | XXX                              |
| H                       | PROFIT (LOSS)                | G-F            | XXX                                       | XXX               | 0                             | XXX                              |
| BUDGET YEAR DATA        |                              |                |   |                   |                               |                                  |
| I                       | INFLATION                    | HSCRC          |   |                   |                               | XXX                              |
| J                       | MISC ADJUSTMENTS             | BUDGET         |   |                   |                               | XXX                              |
| K                       | BUDGET YEAR EXPENSES         | F+I+J          | 0   | 0                 | 0                             | #DIV/0!                          |
| BUDGET YR PROFIT (LOSS) |                              |                |   |                   |                               |                                  |
| L                       | BASE YEAR REVENUE            | RECORDS        | XXX                                       | XXX               | 0                             | XXX                              |
| M                       | ADJUSTMENTS                  | BUDGET         | XXX                                       | XXX               |                               | XXX                              |
| N                       | BUDGET YEAR REVENUE          | L+M            | XXX                                       | XXX               | 0                             | XXX                              |
| O                       | PROFIT (LOSS)                | N-K            | XXX                                       | XXX               | 0                             | XXX                              |
| FTE DATA                |                              |                |   |                   |                               |                                  |
| P                       | BASE YR HRS WORKED/2080      | RECORDS        |   |                   |                               | P                                |
| Q                       | BUDGET YR HRS WORKED/2080    | BUDGET         |   |                   |                               | Q                                |

OTHER INSTITUTIONAL PROGRAMS  
RNS

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YEAR UNITS | BUDGET YEAR UNITS |
|---|-------------|-----------------|-------------------|
| A | # STUDENTS  | 0               | 0                 |

NURSING EDUCATION - 8220

|        | COL. 1                            | COL. 2         | COL. 3                  | COL. 4                     |
|--------|-----------------------------------|----------------|-------------------------|----------------------------|
| SOURCE | WAGES, SALARIES & FRINGE BENEFITS | OTHER EXPENSES | TOTAL EXPENSES, REVENUE | EXPENSES, REVENUE PER UNIT |

BASE YEAR DATA

|    |                              |             |      |     |     |         |    |
|----|------------------------------|-------------|------|-----|-----|---------|----|
| B  | BASE YEAR EXPENSES           | RECORDS     | 0    | 0   | 0   | XXX     | B  |
| C  | ALLOC FROM CAFE, PARK, ETC   | SCH OAC     | 0    | XXX | 0   | XXX     | C  |
| D  | ALLOC FROM GEN SERV CENTERS  | ////        | XXX  | XXX | XXX | XXX     | D  |
|    | COL. 5 COST CENTER           | COL. 6 CODE | //// | XXX | XXX | XXX     |    |
| D1 |                              |             |      |     | 0   | XXX     | D1 |
| D2 |                              |             |      |     | 0   | XXX     | D2 |
| D3 |                              |             |      |     | 0   | XXX     | D3 |
| D4 |                              |             |      |     | 0   | XXX     | D4 |
| D5 |                              |             |      |     | 0   | XXX     | D5 |
| D6 |                              |             |      |     | 0   | XXX     | D6 |
| E  | CAPITAL FACILITIES ALLOWANCE | SCH H3      | XXX  | XXX | 0   | XXX     | E  |
| F  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E     | 0    | 0   | 0   | #DIV/0! | F  |

BASE YEAR PROFIT (LOSS)

|   |                   |         |     |     |   |     |   |
|---|-------------------|---------|-----|-----|---|-----|---|
| G | BASE YEAR REVENUE | RECORDS | XXX | XXX |   | XXX | G |
| H | PROFIT (LOSS)     | G-F     | XXX | XXX | 0 | XXX | H |

BUDGET YEAR DATA

|   |                      |        |   |   |   |         |   |
|---|----------------------|--------|---|---|---|---------|---|
| I | INFLATION            | HSCRC  |   |   |   | XXX     | I |
| J | MISC ADJUSTMENTS     | BUDGET |   |   |   | XXX     | J |
| K | BUDGET YEAR EXPENSES | F+I+J  | 0 | 0 | 0 | #DIV/0! | K |

BUDGET YR PROFIT (LOSS)

|   |                     |         |     |     |   |     |   |
|---|---------------------|---------|-----|-----|---|-----|---|
| L | BASE YEAR REVENUE   | RECORDS | XXX | XXX | 0 | XXX | L |
| M | ADJUSTMENTS         | BUDGET  | XXX | XXX |   | XXX | M |
| N | BUDGET YEAR REVENUE | L+M     | XXX | XXX | 0 | XXX | N |
| O | PROFIT (LOSS)       | N-K     | XXX | XXX | 0 | XXX | O |

FTE DATA

|   |                           |         |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|---|
| P | BASE YR HRS WORKED/2080   | RECORDS |  |  |  |  | P |
| Q | BUDGET YR HRS WORKED/2080 | BUDGET  |  |  |  |  | Q |



OTHER INSTITUTIONAL PROGRAMS

OHE

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|   |             |                 |                   |
|---|-------------|-----------------|-------------------|
|   | VOLUME DATA | BASE YEAR UNITS | BUDGET YEAR UNITS |
| A | # STUDENTS  | 0               | 0                 |

OTHER HEALTH PROFESSION EDUCATION -

8260

| SOURCE | COL. 1                            | COL. 2         | COL. 3                  | COL. 4                     |
|--------|-----------------------------------|----------------|-------------------------|----------------------------|
|        | WAGES, SALARIES & FRINGE BENEFITS | OTHER EXPENSES | TOTAL EXPENSES, REVENUE | EXPENSES, REVENUE PER UNIT |

BASE YEAR DATA

|    |                              |             |      |     |     |         |    |
|----|------------------------------|-------------|------|-----|-----|---------|----|
| B  | BASE YEAR EXPENSES           | RECORDS     | 0    | 0   | 0   | XXX     | B  |
| C  | ALLOC FROM CAFE, PARK, ETC   | SCH OAC     | 0    | XXX | 0   | XXX     | C  |
| D  | ALLOC FROM GEN SERV CENTERS  | ////        | XXX  | XXX | XXX | XXX     | D  |
|    | COL. 5 COST CENTER           | COL. 6 CODE | //// | XXX | XXX | XXX     |    |
| D1 |                              |             |      |     | 0   | XXX     | D1 |
| D2 |                              |             |      |     | 0   | XXX     | D2 |
| D3 |                              |             |      |     | 0   | XXX     | D3 |
| D4 |                              |             |      |     | 0   | XXX     | D4 |
| D5 |                              |             |      |     | 0   | XXX     | D5 |
| D6 |                              |             |      |     | 0   | XXX     | D6 |
| E  | CAPITAL FACILITIES ALLOWANCE | SCH H3      | XXX  | XXX |     | XXX     | E  |
| F  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E     | 0    | 0   | 0   | #DIV/0! | F  |

BASE YEAR PROFIT (LOSS)

|   |                   |         |     |     |   |     |   |
|---|-------------------|---------|-----|-----|---|-----|---|
| G | BASE YEAR REVENUE | RECORDS | XXX | XXX |   | XXX | G |
| H | PROFIT (LOSS)     | G-F     | XXX | XXX | 0 | XXX | H |

BUDGET YEAR DATA

|   |                      |        |   |   |   |         |   |
|---|----------------------|--------|---|---|---|---------|---|
| I | INFLATION            | HSCRC  |   |   |   | XXX     | I |
| J | MISC ADJUSTMENTS     | BUDGET |   |   |   | XXX     | J |
| K | BUDGET YEAR EXPENSES | F+I+J  | 0 | 0 | 0 | #DIV/0! | K |

BUDGET YR PROFIT (LOSS)

|   |                     |         |     |     |   |     |   |
|---|---------------------|---------|-----|-----|---|-----|---|
| L | BASE YEAR REVENUE   | RECORDS | XXX | XXX | 0 | XXX | L |
| M | ADJUSTMENTS         | BUDGET  | XXX | XXX |   | XXX | M |
| N | BUDGET YEAR REVENUE | L+M     | XXX | XXX | 0 | XXX | N |
| O | PROFIT (LOSS)       | N-K     | XXX | XXX | 0 | XXX | O |

FTE DATA

|   |                           |         |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|---|
| P | BASE YR HRS WORKED/2080   | RECORDS |  |  |  |  | P |
| Q | BUDGET YR HRS WORKED/2080 | BUDGET  |  |  |  |  | Q |

OTHER INSTITUTIONAL PROGRAMS  
CHE

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YEAR UNITS | BUDGET YEAR UNITS |
|---|-------------|-----------------|-------------------|
| A | # PART.     | 0               | 0                 |

COMMUNITY HEALTH EDUCATION - 8270

|        | COL. 1                                    | COL. 2            | COL. 3                        | COL. 4                           |
|--------|---|-------------------|-------------------------------|----------------------------------|
| SOURCE | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES,<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |

BASE YEAR DATA

|    |                              |                |      |     |     |         |    |
|----|------------------------------|----------------|------|-----|-----|---------|----|
| B  | BASE YEAR EXPENSES           | RECORDS        | 0.0  | 0.0 | 0.0 | XXX     | B  |
| C  | ALLOC FROM CAFE, PARK, ETC   | SCH OAC        | 0.0  | XXX | 0.0 | XXX     | C  |
| D  | ALLOC FROM GEN SERV CENTERS  | ////           | XXX  | XXX | XXX | XXX     | D  |
|    | COL. 5<br>COST CENTER        | COL. 6<br>CODE | //// | XXX | XXX | XXX     |    |
| D1 |                              |                |      |     | 0.0 | XXX     | D1 |
| D2 |                              |                |      |     | 0.0 | XXX     | D2 |
| D3 |                              |                |      |     | 0   | XXX     | D3 |
| D4 |                              |                |      |     | 0   | XXX     | D4 |
| D5 |                              |                |      |     | 0   | XXX     | D5 |
| D6 |                              |                |      |     | 0   | XXX     | D6 |
| E  | CAPITAL FACILITIES ALLOWANCE | SCH H3         | XXX  | XXX | 0   | XXX     | E  |
| F  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E        | 0.0  | 0.0 | 0.0 | #DIV/0! | F  |

BASE YEAR PROFIT (LOSS)

|   |                   |         |     |     |     |     |   |
|---|-------------------|---------|-----|-----|-----|-----|---|
| G | BASE YEAR REVENUE | RECORDS | XXX | XXX |     | XXX | G |
| H | PROFIT (LOSS)     | G-F     | XXX | XXX | 0.0 | XXX | H |

BUDGET YEAR DATA

|   |                      |        |  |  |  |     |   |
|---|----------------------|--------|--|--|--|-----|---|
| I | INFLATION            | HSCRC  |  |  |  | XXX | I |
| J | MISC ADJUSTMENTS     | BUDGET |  |  |  | XXX | J |
| K | BUDGET YEAR EXPENSES | F+I+J  |  |  |  |     | K |

BUDGET YR PROFIT (LOSS)

|   |                     |         |     |     |   |     |   |
|---|---------------------|---------|-----|-----|---|-----|---|
| L | BASE YEAR REVENUE   | RECORDS | XXX | XXX | 0 | XXX | L |
| M | ADJUSTMENTS         | BUDGET  | XXX | XXX |   | XXX | M |
| N | BUDGET YEAR REVENUE | L+M     | XXX | XXX | 0 | XXX | N |
| O | PROFIT (LOSS)       | N-K     | XXX | XXX | 0 | XXX | O |

FTE DATA

|   |                           |         |     |  |  |  |   |
|---|---------------------------|---------|-----|--|--|--|---|
| P | BASE YR HRS WORKED/2080   | RECORDS | 0.0 |  |  |  | P |
| Q | BUDGET YR HRS WORKED/2080 | BUDGET  |     |  |  |  | Q |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

Allocation of Cafeteria/Parking Expense

| LOSS PER FTE |                                    | SOURCE         | COL. 1<br>TOTAL |
|--------------|------------------------------------|----------------|-----------------|
| A            | GAIN (LOSS) TO BE ALLOC. AS FRINGE | SCH E2, E7, E8 |                 |
| B            | NUMBER OF FTE'S                    | RECORDS        | 86.4            |
| B1           | LOSS PER FTE                       | A/B            |                 |

Allocation of Data Processing

| LOSS PER FTE |                                | SOURCE  | COL. 2<br>WAGES, SALARIES &<br>BENEFITS | COL. 3<br>OTHER EXPENSES | COL. 4<br>TOTAL EXPENSES |
|--------------|--------------------------------|---------|---|--------------------------|--------------------------|
| C1           | FISCAL YEAR EXPENSES           | RECORDS | 230.9                                   | 281.2                    | 512.0                    |
| 2            | DONATED SERVICES & COMMODITIES | RECORDS |   |                          |                          |
| 3            | FISCAL YEAR ADJUSTED EXPENSES  | A+B     | 230.9                                   | 281.2                    | 512.0                    |

DISTRIBUTIONS

CAFETERIA, PARKING ETC. ALLOCATION

DATA PROCESSING ALLOCATION

| D1 | DIETARY SERVICES          | SCHED | CODE | CAFETERIA, PARKING ETC. ALLOCATION |                 | DATA PROCESSING ALLOCATION    |                         | WAGES, SALARIES &<br>F. BENEFITS | OTHER<br>EXPENSES | COL.7<br>DP ALLOCATION | COL. 8<br>COL. 2 + COL. 7<br>TOTAL ALLOCATED EXPENSE |
|----|---------------------------|-------|------|------------------------------------|-----------------|-------------------------------|-------------------------|----------------------------------|-------------------|------------------------|--|
|    |                           |       |      | COL. 1<br>FTE                      | COL. 2<br>B1*D1 | COL. 3<br>ALLOCATED<br>AMOUNT | COL. 4<br>BASIS - hours |                                  |                   |                        |  |
| 2  | LAUNDRY & LINEN           | C2    | LL   |                                    |                 | 12.0                          | 0.002                   | 0.5                              | 0.6               | 1.1                    | 1.1  |
| 3  | SOCIAL SERVICES           | C3    | SSS  | 0.2                                |                 | 8.0                           | 0.001                   | 0.3                              | 0.4               | 0.7                    | 0.7  |
| 4  | PURCHASING & STORES       | C4    | PUR  | 1.7                                |                 | 18.0                          | 0.003                   | 0.7                              | 0.9               | 1.6                    | 1.6  |
| 5  | PLANT OPERATIONS          | C5    | POP  | 4.7                                |                 | 430.0                         | 0.076                   | 17.5                             | 21.3              | 38.8                   | 38.8   |
| 6  | HOUSEKEEPING              | C6    | HKP  | 9.2                                |                 | 144.0                         | 0.025                   | 5.9                              | 7.1               | 13.0                   | 13.0   |
| 7  | CENTRAL SERVICES & SUPPLY | C7    | CSS  | 0.7                                |                 | 7.0                           | 0.001                   | 0.3                              | 0.3               | 0.6                    | 0.6  |
| 8  | PHARMACY                  | C8    | PHM  | 1.8                                |                 | 84.0                          | 0.015                   | 3.4                              | 4.2               | 7.6                    | 7.6  |
| 9  | GENERAL ACCOUNTING        | C9    | FIS  | 2.7                                |                 | 101.0                         | 0.018                   | 4.1                              | 5.0               | 9.1                    | 9.1  |
| 10 | PATIENT ACCOUNTS          | C10   | PAC  | 6.7                                |                 | 466.0                         | 0.082                   | 19.0                             | 23.1              | 42.1                   | 42.1   |
| 11 | HOSP ADMINISTRATION       | C11   | MGT  | 4.3                                |                 | 515.0                         | 0.091                   | 20.9                             | 25.5              | 46.4                   | 46.4   |
| 12 | MEDICAL RECORDS           | C12   | MRD  | 3.4                                |                 | 114.0                         | 0.020                   | 4.6                              | 5.7               | 10.3                   | 10.3   |
| 13 | MEDICAL STAFF ADMIN       | C13   | MSA  |                                    |                 | 1.0                           | 0.000                   | 0.0                              | 0.1               | 0.1                    | 0.1  |
| 14 | NURSING ADMIN             | C14   | NAD  | 1.3                                |                 | 120.0                         | 0.021                   | 4.9                              | 6.0               | 10.8                   | 10.8   |
| 15 | ORGAN ACQUISITION OH      | C15   | OAO  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 16 | MED SURGICAL ACUTE        | D1    | MSG  | 7.5                                |                 | 272.0                         | 0.046                   | 10.7                             | 13.0              | 23.7                   | 23.7   |
| 17 | PEDIATRIC ACUTE           | D2    | PED  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 18 | PSYCHIATRIC ACUTE         | D3    | PSY  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 19 | OBSTETRICS ACUTE          | D4    | OBS  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 20 | DEF. OBSERVATION          | D5    | DEF  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 21 | MED SURG INTENSIVE CARE   | D6    | MIS  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 22 | CORONARY CARE             | D7    | CCU  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 23 | PEDIATRIC INTENSIVE CARE  | D8    | PIC  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 24 | NEO-NATAL INTEN. CARE     | D9    | NEO  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 25 | BURN CARE                 | D10   | BUR  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 26 | PSYCHIATRIC INTEN CARE    | D11   | PSI  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 27 | SHOCK TRAUMA              | D12   | TRM  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 28 | ONCOLOGY                  | D13   | ONC  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 29 | NEWBORN NURSERY           | D14   | NUR  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 30 | PREMATURE NURSERY         | D15   | PRE  |                                    |                 |                               |                         |                                  |                   |                        |  |
| 31 | INTERMEDIATE CARE         | D17   | ICC  |                                    |                 |                               |                         |                                  |                   |                        |  |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

| DISTRIBUTIONS |                               | CAFETERIA, PARKING ETC. ALLOCATION |        | DATA PROCESSING ALLOCATION |        | COL. 5                        | COL. 6         | COL. 7        | COL. 8                  |      |
|---------------|-------------------------------|------------------------------------|--------|----------------------------|--------|-------------------------------|----------------|---------------|-------------------------|------|
|               |                               | COL. 1                             | COL. 2 | COL. 3                     | COL. 4 | WAGES, SALARIES & F. BENEFITS | OTHER EXPENSES | DP ALLOCATION | COL. 2 + COL. 7         |      |
| SCHED         | CODE                          | FTE                                | B1*D1  | ALLOCATED AMOUNT           | BASIS  |                               |                |               | TOTAL ALLOCATED EXPENSE |      |
| 32            | EMERGENCY SERVICES            | D18                                | EMG    | 11.9                       |        | 886.0                         | 0.156          | 36.0          | 43.9                    | 79.9 |
| 33            | CLINIC SERVICES               | D19                                | CL     | 9.3                        |        | 769.0                         | 0.135          | 31.3          | 38.1                    | 69.3 |
| 34            | PSYCH DAY/NIGHT CARE          | D20                                | PDC    |                            |        |                               |                |               |                         |      |
| 35            | SAME DAY SURGERY              | D22                                | SDS    | 1.2                        |        | 62.0                          | 0.011          | 2.5           | 3.1                     | 5.6  |
| 36            | LABOR & DELIVERY SERV.        | D23                                | DEL    |                            |        |                               |                |               |                         |      |
| 37            | OPERATING ROOM                | D24                                | OR     | 1.0                        |        | 81.0                          | 0.014          | 3.3           | 4.0                     | 7.3  |
| 38            | OPERATING ROOM CLINIC         | D24A                               | ORC    | 0.2                        |        | 15.0                          | 0.003          | 0.6           | 0.8                     | 1.4  |
| 39            | ANESTHESIOLOGY                | D25                                | ANS    | 0.6                        |        | 129.0                         | 0.023          | 5.2           | 6.4                     | 11.6 |
| 40            | LABORATORY SERVICES           | D28                                | LAB    | 6.3                        |        | 498.0                         | 0.088          | 20.3          | 24.7                    | 44.9 |
| 41            | ELECTROCARDIOGRAPHY           | D30                                | EKG    | 0.6                        |        | 22.0                          | 0.004          | 0.9           | 1.1                     | 1.9  |
| 42            | INTERVENTIONAL RAD/CARD       | D31                                | IRC    |                            |        |                               |                |               |                         |      |
| 43            | RADIOLOGY-DIAGNOSTIC          | D32                                | RAD    | 4.6                        |        | 269.0                         | 0.047          | 10.9          | 13.3                    | 24.3 |
| 44            | CT SCANNER                    | D33                                | CAT    | 0.7                        |        | 62.0                          | 0.011          | 2.5           | 3.1                     | 5.6  |
| 45            | RADIOLOGY-THERAPEUTIC         | D34                                | RAT    |                            |        |                               |                |               |                         |      |
| 46            | NUCLEAR MEDICINE              | D35                                | NUC    |                            |        |                               |                |               |                         |      |
| 47            | RESPIRATORY THERAPY           | D36                                | RES    | 1.3                        |        | 77.0                          | 0.014          | 3.1           | 3.8                     | 7.0  |
| 48            | PULMONARY FUNC. TESTING       | D37                                | PUL    |                            |        |                               |                |               |                         |      |
| 49            | ELECTROENCEPHALOGRAPHY        | D38                                | EEG    |                            |        |                               |                |               |                         |      |
| 50            | PHYSICAL THERAPY              | D39                                | PTH    | 1.8                        |        | 125.0                         | 0.022          | 5.1           | 6.2                     | 11.3 |
| 51            | OCCUPATIONAL THERAPY          | D40                                | OTH    | 0.4                        |        |                               |                |               |                         |      |
| 52            | SPEECH THERAPY                | D41                                | STH    | 0.1                        |        |                               |                |               |                         |      |
| 53            | RECREATIONAL THERAPY          | D42                                | REC    |                            |        |                               |                |               |                         |      |
| 54            | AUDIOLOGY                     | D43                                | AUD    |                            |        |                               |                |               |                         |      |
| 55            | OTHER PHYSICAL MEDICINE       | D44                                | OPM    |                            |        |                               |                |               |                         |      |
| 56            | RENAL DIALYSIS                | D45                                | RDL    |                            |        |                               |                |               |                         |      |
| 57            | ORGAN ACQUISITION             | D46                                | OA     |                            |        |                               |                |               |                         |      |
| 58            | LEUKOPHERESIS                 | D48                                | LEU    |                            |        |                               |                |               |                         |      |
| 59            | HYPERBARIC CHAMBER            | D49                                | HYP    |                            |        |                               |                |               |                         |      |
| 60            | FREESTANDING EMERGENCY SVCES. | D50                                | FSE    |                            |        |                               |                |               |                         |      |
| 61            | MRI SCANNER                   | D51                                | MRI    |                            |        | 2.0                           | 0.000          | 0.1           | 0.1                     | 0.1  |
| 62            | LITHOTRIPSY                   | D53                                | LIT    |                            |        |                               |                |               |                         |      |
| 63            | REHABILITATION                | D54                                | RHB    |                            |        |                               |                |               |                         |      |
| 64            | OBSERVATION                   | D55                                | OBV    | 2.4                        |        | 103.0                         | 0.018          | 4.2           | 5.1                     | 9.3  |
| 65            | AMB SERVICES-REBUNDLED        | D56                                | AMR    |                            |        | 23.0                          | 0.004          | 0.9           | 1.1                     | 2.1  |
| 66            | TRANSURETHRAL MICROWAVE THER. | D57                                | TMT    |                            |        |                               |                |               |                         |      |
| 67            | ONCOLOGY O/P CLINIC           | D58                                | OCL    |                            |        |                               |                |               |                         |      |
| 68            | TRANSURETHRAL NEEDLE ABLATION | D59                                | TNA    |                            |        |                               |                |               |                         |      |
| 69            | PSYCH ADULT                   | D70                                | PAD    |                            |        |                               |                |               |                         |      |
| 70            | PSYCH CHILD/ADOLESES.         | D71                                | PDC    |                            |        |                               |                |               |                         |      |
| 71            | PSYCH GERIATRIC               | D73                                | PSG    |                            |        |                               |                |               |                         |      |
| 72            | INDIVIDUAL THERAPIES          | D74                                | ITH    |                            |        |                               |                |               |                         |      |
| 73            | GROUP THERAPIES               | D75                                | GTH    |                            |        |                               |                |               |                         |      |
| 74            | FAMILY THERAPIES              | D76                                | FTH    |                            |        |                               |                |               |                         |      |
| 75            | PSYCH TESTING                 | D77                                | PST    |                            |        |                               |                |               |                         |      |
| 76            | EDUCATION                     | D78                                | PSE    |                            |        |                               |                |               |                         |      |
| 77            | OTHER THERAPIES               | D79                                | OPT    |                            |        |                               |                |               |                         |      |
| 78            | ELECTROCONV. THERAPY          | D80                                | ETH    |                            |        |                               |                |               |                         |      |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

| DISTRIBUTIONS |                            | CAFETERIA, PARKING ETC. ALLOCATION |        | DATA PROCESSING ALLOCATION |        | COL. 5                        | COL. 6         | COL. 7        | COL. 8                  |
|---------------|----------------------------|------------------------------------|--------|----------------------------|--------|-------------------------------|----------------|---------------|-------------------------|
|               |                            | COL. 1                             | COL. 2 | COL. 3                     | COL. 4 | WAGES, SALARIES & F. BENEFITS | OTHER EXPENSES | DP ALLOCATION | COL. 2 + COL. 7         |
| SCHED         | CODE                       | FTE                                | B1*D1  | ALLOCATED AMOUNT           | BASIS  |                               |                |               | TOTAL ALLOCATED EXPENSE |
| 79            | ACTIVITY THERAPY           | D81                                | ATH    |                            |        |                               |                |               |                         |
| 80            | AMBULANCE SERVICES         | E1                                 | AMB    |                            |        |                               |                |               |                         |
| 81            | DR. PRIVATE OFFICE RENTAL  | E3                                 | DPO    |                            |        |                               |                |               |                         |
| 82            | OFFICE & OTHER RENTAL      | E4                                 | OOR    |                            |        |                               |                |               |                         |
| 83            | RETAIL OPERATIONS          | E5                                 | REO    |                            |        |                               |                |               |                         |
| 84            | PATIENT TELEPHONES         | E6                                 | PTE    |                            |        |                               |                |               |                         |
| 85            | RESEARCH                   | F1                                 | REG    |                            |        |                               |                |               |                         |
| 86            | NURSING EDUCATION          | F2                                 | RNS    |                            |        |                               |                |               |                         |
| 87            | OTHER HEALTH PROF. EDUCA.  | F3                                 | ONE    |                            |        |                               |                |               |                         |
| 88            | COMMUNITY HEALTH EDUC.     | F4                                 | CHE    |                            |        |                               |                |               |                         |
| 89            | MEDICAL SURG ACUTE         | P2A                                | MSG    |                            |        |                               |                |               |                         |
| 90            | PEDIATRIC ACUTE            | P2A                                | PED    |                            |        |                               |                |               |                         |
| 91            | PSYCHIATRIC ACUTE          | P2A                                | PSY    |                            |        |                               |                |               |                         |
| 92            | OBSTETRICS ACUTE           | P2A                                | OBS    |                            |        |                               |                |               |                         |
| 93            | DEFINITIVE OBSERVATION     | P2A                                | DEF    |                            |        |                               |                |               |                         |
| 94            | MED SURG INTENSIVE CARE    | P2A                                | MIS    |                            |        |                               |                |               |                         |
| 95            | CORONARY CARE              | P2A                                | CCU    |                            |        |                               |                |               |                         |
| 96            | PEDIATRIC INTENSIVE CARE   | P2B                                | PIC    |                            |        |                               |                |               |                         |
| 97            | NEO-NATAL INTENSIVE CARE   | P2B                                | NEO    |                            |        |                               |                |               |                         |
| 98            | BURN CARE                  | P2B                                | BUR    |                            |        |                               |                |               |                         |
| 99            | PSYCHIATRIC INTENSIVE CARE | P2B                                | PSI    |                            |        |                               |                |               |                         |
| 100           | SHOCK TRAUMA               | P2B                                | TRM    |                            |        |                               |                |               |                         |
| 101           | ONCOLOGY                   | P2B                                | ONC    |                            |        |                               |                |               |                         |
| 102           | NEWBORN NURSERY            | P2B                                | NUR    |                            |        |                               |                |               |                         |
| 103           | PREMATURE NURSERY          | P2C                                | PRE    |                            |        |                               |                |               |                         |
| 104           | INTERMEDIATE CARE          | P2C                                | ICC    |                            |        |                               |                |               |                         |
| 105           | EMERGENCY CARE             | P2C                                | EMG    |                            |        |                               |                |               |                         |
| 106           | CLINIC SERVICES            | P2C                                | CL     |                            |        |                               |                |               |                         |
| 107           | PSYCH DAY/NIGHT SERVICES   | P2C                                | PDC    |                            |        |                               |                |               |                         |
| 108           | SAME DAY SURGERY           | P2C                                | SDS    |                            |        |                               |                |               |                         |
| 109           | MRI SCANNER                | P2D                                | MRI    |                            |        |                               |                |               |                         |
| 110           | LABOR & DELIVERY           | P2D                                | DEL    |                            |        |                               |                |               |                         |
| 111           | OPERATING ROOM             | P2D                                | OR     |                            |        |                               |                |               |                         |
| 112           | OPERATING ROOM CLINIC      | P2D                                | ORC    |                            |        |                               |                |               |                         |
| 113           | ANESTHESIOLOGY             | P2D                                | ANS    |                            |        |                               |                |               |                         |
| 114           | LABORATORY SERVICES        | P2D                                | LAB    |                            |        |                               |                |               |                         |
| 115           | ELECTROCARDIOGRAPHY        | P2D                                | EKG    |                            |        |                               |                |               |                         |
| 116           | INTERVENTIONAL RAD/CARD    | P2E                                | CAC    |                            |        |                               |                |               |                         |
| 117           | RADIOLOGY DIAGNOSTIC       | P2E                                | RAD    |                            |        |                               |                |               |                         |
| 118           | CT SCANNER                 | P2E                                | CAT    |                            |        |                               |                |               |                         |
| 119           | RADIOLOGY THERAPEUTIC      | P2E                                | RAT    |                            |        |                               |                |               |                         |
| 120           | NUCLEAR MEDICINE           | P2C                                | NUC    |                            |        |                               |                |               |                         |
| 121           | RESPIRATORY THERAPY        | P2E                                | RES    |                            |        |                               |                |               |                         |
| 122           | PULMONARY FUNC TESTING     | P2E                                | PUL    |                            |        |                               |                |               |                         |
| 123           | ELECTROENCEPHALOGRAPHY     | P2F                                | EEG    |                            |        |                               |                |               |                         |
| 124           | PHYSICAL THERAPY           | P2F                                | PTH    |                            |        |                               |                |               |                         |
| 125           | OCCUPATIONAL THERAPY       | P2F                                | OTH    |                            |        |                               |                |               |                         |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

| DISTRIBUTIONS |                               | CAFETERIA, PARKING ETC. ALLOCATION |        | DATA PROCESSING ALLOCATION |        | COL. 5                        | COL. 6         | COL. 7        | COL. 8                  |
|---------------|-------------------------------|------------------------------------|--------|----------------------------|--------|-------------------------------|----------------|---------------|-------------------------|
|               |                               | COL. 1                             | COL. 2 | COL. 3                     | COL. 4 | WAGES, SALARIES & F. BENEFITS | OTHER EXPENSES | DP ALLOCATION | COL. 2 + COL. 7         |
| SCHED         | CODE                          | FTE                                | B1*D1  | ALLOCATED AMOUNT           | BASIS  |                               |                |               | TOTAL ALLOCATED EXPENSE |
| 126           | SPEECH LANG. PATHOLOGY        | P2F                                | STH    |                            |        |                               |                |               |                         |
| 127           | RECREATIONAL THERAPY          | P2F                                | REC    |                            |        |                               |                |               |                         |
| 128           | AUDIOLOGY                     | P2F                                | AUD    |                            |        |                               |                |               |                         |
| 129           | OTHER PHYSICAL MEDICINE       | P2F                                | OPM    |                            |        |                               |                |               |                         |
| 130           | RENAL DIALYSIS                | P2G                                | RDL    |                            |        |                               |                |               |                         |
| 131           | ORGAN ACQUISITION             | P2G                                | OA     |                            |        |                               |                |               |                         |
| 132           | LEUKOPHERESIS                 | P2G                                | LEU    |                            |        |                               |                |               |                         |
| 133           | HYPERBARIC CHAMBER            | P2G                                | HYP    |                            |        |                               |                |               |                         |
| 134           | FREE STANDING EMG SERV        | P2G                                | FSE    |                            |        |                               |                |               |                         |
| 135           | LITHOTRIPSY                   | P2G                                | LIT    |                            |        |                               |                |               |                         |
| 136           | REHABILITATION                | P2H                                | RHB    |                            |        |                               |                |               |                         |
| 137           | TRANSURETHRAL MICROWAVE THER. | P2H                                | TMT    |                            |        |                               |                |               |                         |
| 138           | ONCOLOGY O/P CLINIC           | P2H                                | OCL    |                            |        |                               |                |               |                         |
| 139           | TRANSURETHRAL NEEDLE ABLATION | P2H                                | TNA    |                            |        |                               |                |               |                         |
| 140           | PSYCH ADULT                   | P2H                                | PAD    |                            |        |                               |                |               |                         |
| 141           | PSYCH CHILD/ADOLESCENT        | P2H                                | PCD    |                            |        |                               |                |               |                         |
| 142           | PSYCH GERIATRIC               | P2H                                | PSI    |                            |        |                               |                |               |                         |
| 143           | INDIVIDUAL THERAPIES          | P2I                                | ITH    |                            |        |                               |                |               |                         |
| 144           | GROUP THERAPIES               | P2I                                | GTH    |                            |        |                               |                |               |                         |
| 145           | PSYCH TESTING                 | P2I                                | PST    |                            |        |                               |                |               |                         |
| 146           | EDUCATION                     | P2I                                | PSE    |                            |        |                               |                |               |                         |
| 147           | OTHER THERAPIES               | P2I                                | OPT    |                            |        |                               |                |               |                         |
| 148           | ACTIVITY THERAPY              | P2I                                | ATH    |                            |        |                               |                |               |                         |
| 149           | MEDICAL SURG ACUTE            | P3A                                | MSG    |                            |        |                               |                |               |                         |
| 150           | PEDIATRIC ACUTE               | P3A                                | PED    |                            |        |                               |                |               |                         |
| 151           | PSYCHIATRIC ACUTE             | P3A                                | PSY    |                            |        |                               |                |               |                         |
| 152           | OBSTETRICS ACUTE              | P3A                                | OBS    |                            |        |                               |                |               |                         |
| 153           | DEFINITIVE OBSERVATION        | P3A                                | DEF    |                            |        |                               |                |               |                         |
| 154           | M/S INTENSIVE CARE            | P3A                                | MIS    |                            |        |                               |                |               |                         |
| 155           | CORONARY CARE                 | P3A                                | CCU    |                            |        |                               |                |               |                         |
| 156           | PEDIATRIC INTENSIVE CARE      | P3B                                | PIC    |                            |        |                               |                |               |                         |
| 157           | NEO-NATAL INTEN. CARE         | P3B                                | NEO    |                            |        |                               |                |               |                         |
| 158           | BURN CARE                     | P3B                                | BUR    |                            |        |                               |                |               |                         |
| 159           | PSYCHIATRIC INTEN. CARE       | P3B                                | PSI    |                            |        |                               |                |               |                         |
| 160           | SHOCK TRAUMA                  | P3B                                | TRM    |                            |        |                               |                |               |                         |
| 161           | ONCOLOGY                      | P3B                                | ONC    |                            |        |                               |                |               |                         |
| 162           | NEWBORN NURSERY               | P3B                                | NUR    |                            |        |                               |                |               |                         |
| 163           | PREMATURE NURSERY             | P3C                                | PRE    |                            |        |                               |                |               |                         |
| 164           | INTERMEDIATE CARE             | P3C                                | ICC    |                            |        |                               |                |               |                         |
| 165           | EMERGENCY SERVICES            | P3C                                | EMG    |                            |        |                               |                |               |                         |
| 166           | CLINIC SERVICES               | P3C                                | CL     |                            |        |                               |                |               |                         |
| 167           | PSYCH DAY/NIGHT CARE          | P3C                                | PDC    |                            |        |                               |                |               |                         |
| 168           | SAME DAY SURGERY              | P3C                                | SDS    |                            |        |                               |                |               |                         |
| 169           | MRI SCANNER                   | P3D                                | MRI    |                            |        |                               |                |               |                         |
| 170           | LABOR AND DELIVERY            | P3D                                | DEL    |                            |        |                               |                |               |                         |
| 171           | OPERATING ROOM                | P3D                                | OR     |                            |        |                               |                |               |                         |
| 172           | OPERATING ROOM CLINIC         | P3D                                | ORC    |                            |        |                               |                |               |                         |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

| DISTRIBUTIONS | CAFETERIA, PARKING ETC. ALLOCATION |                 | DATA PROCESSING ALLOCATION    |                 | COL. 5<br>WAGES, SALARIES &<br>F. BENEFITS | COL. 6<br>OTHER<br>EXPENSES | COL. 7<br>DP ALLOCATION | COL. 8<br>COL. 2 + COL. 7<br>TOTAL ALLOCATED EXPENSE |
|---------------|------------------------------------|-----------------|-------------------------------|-----------------|--|-----------------------------|-------------------------|--|
|               | COL. 1<br>FTE                      | COL. 2<br>B1*D1 | COL. 3<br>ALLOCATED<br>AMOUNT | COL. 4<br>BASIS |  |                             |                         |  |
|               | SCHED                              | CODE            |                               |                 |  |                             |                         |  |
| 173           | ANESTHESIOLOGY                     | P3D             | ANS                           |                 |  |                             |                         |  |
| 174           | LABORATORY SERVICES                | P3D             | LAB                           |                 |  |                             |                         |  |
| 175           | ELECTROCARDIOGRAPHY                | P3D             | EKG                           |                 |  |                             |                         |  |
| 176           | INTERVENTIONAL RAD/CARD            | P3E             | IRC                           |                 |  |                             |                         |  |
| 177           | RADIOLOGY DIAGNOSTIC               | P3E             | RAD                           |                 |  |                             |                         |  |
| 178           | CT SCANNER                         | P3E             | CAT                           |                 |  |                             |                         |  |
| 179           | RADIOLOGY THERAPEUTIC              | P3E             | RAT                           |                 |  |                             |                         |  |
| 180           | NUCLEAR MEDICINE                   | P3E             | NUC                           |                 |  |                             |                         |  |
| 181           | RESPIRATORY THERAPY                | P3E             | RES                           |                 |  |                             |                         |  |
| 182           | PULMONARY FUNCTION TESTING         | P3E             | PUL                           |                 |  |                             |                         |  |
| 183           | ELECTROENCEPHALOGRAPHY             | P3F             | EEG                           |                 |  |                             |                         |  |
| 184           | PHYSICAL THERAPY                   | P3F             | PTH                           |                 |  |                             |                         |  |
| 185           | OCCUPATIONAL THERAPY               | P3F             | OTH                           |                 |  |                             |                         |  |
| 186           | SPEECH LANG. PATHOLOGY             | P3F             | STH                           |                 |  |                             |                         |  |
| 187           | RECREATIONAL THERAPY               | P3F             | REC                           |                 |  |                             |                         |  |
| 188           | AUDIOLOGY                          | P3F             | AUD                           |                 |  |                             |                         |  |
| 189           | OTHER PHYSICAL MEDICINE            | P3F             | OPM                           |                 |  |                             |                         |  |
| 190           | RENAL DIALYSIS                     | P3G             | RDL                           |                 |  |                             |                         |  |
| 191           | ORGAN ACQUISITION                  | P3G             | OA                            |                 |  |                             |                         |  |
| 192           | LEUKOPHERESIS                      | P3G             | LEU                           |                 |  |                             |                         |  |
| 193           | HYPERBARIC CHAMBER                 | P3G             | HYP                           |                 |  |                             |                         |  |
| 194           | FREE STANDING EMG SERV             | P3G             | FSE                           |                 |  |                             |                         |  |
| 195           | LITHOTRIPSY                        | P3G             | LIT                           |                 |  |                             |                         |  |
| 196           | REHABILITATION                     | P3G             | RHB                           |                 |  |                             |                         |  |
| 197           | TRANSURETHRAL MICROWAVE THER.      | P3H             | TMT                           |                 |  |                             |                         |  |
| 198           | ONCOLOGY O/P CLINIC                | P3H             | OCL                           |                 |  |                             |                         |  |
| 199           | TRANSURETHRAL NEEDLE ABLATION      | P3H             | TNA                           |                 |  |                             |                         |  |
| 200           | MEDICAL SURGICAL ACUTE             | P4A             | MSG                           |                 |  |                             |                         |  |
| 201           | PEDIATRIC ACUTE                    | P4A             | PED                           |                 |  |                             |                         |  |
| 202           | PSYCHIATRIC ACUTE                  | P4A             | PSY                           |                 |  |                             |                         |  |
| 203           | OBSTETRICS ACUTE                   | P4A             | OBS                           |                 |  |                             |                         |  |
| 204           | DEFINITIVE OBSERVATION             | P4A             | DEF                           |                 |  |                             |                         |  |
| 205           | MED SURG INTENSIVE CARE            | P4A             | MIS                           |                 |  |                             |                         |  |
| 206           | CORONARY CARE                      | P4A             | CCU                           |                 |  |                             |                         |  |
| 207           | PEDIATRIC INTENSIVE CARE           | P4B             | PIC                           |                 |  |                             |                         |  |
| 208           | NEO NATAL INTENSIVE CARE           | P4B             | NEO                           |                 |  |                             |                         |  |
| 209           | BURN CARE                          | P4B             | BUR                           |                 |  |                             |                         |  |
| 210           | PSYCHIATRIC INTEN CARE             | P4B             | PSI                           |                 |  |                             |                         |  |
| 211           | SHOCK TRAUMA                       | P4B             | TRM                           |                 |  |                             |                         |  |
| 212           | ONCOLOGY                           | P4B             | ONC                           |                 |  |                             |                         |  |
| 213           | NEWBORN NURSERY                    | P4B             | NUR                           |                 |  |                             |                         |  |
| 214           | PREMATURE NURSERY                  | P4C             | PRE                           |                 |  |                             |                         |  |
| 215           | INTERMEDIATE CARE                  | P4C             | ICC                           |                 |  |                             |                         |  |
| 216           | EMERGENCY SERVICES                 | P4C             | EMG                           |                 |  |                             |                         |  |
| 217           | CLINIC SERVICES                    | P4C             | CL                            |                 |  |                             |                         |  |
| 218           | PSYCH DAY & NIGHT CARE             | P4C             | PDC                           |                 |  |                             |                         |  |
| 219           | SAME DAY SURGERY                   | P4A             | SDS                           |                 |  |                             |                         |  |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

| DISTRIBUTIONS | CAFETERIA, PARKING ETC. ALLOCATION |        | DATA PROCESSING ALLOCATION |        | COL. 5<br>WAGES, SALARIES &<br>F. BENEFITS | COL. 6<br>OTHER<br>EXPENSES | COL. 7<br>DP ALLOCATION | COL. 8<br>COL. 2 + COL. 7<br>TOTAL ALLOCATED EXPENSE |
|---------------|------------------------------------|--------|----------------------------|--------|--|-----------------------------|-------------------------|--|
|               | COL. 1                             | COL. 2 | COL. 3                     | COL. 4 |  |                             |                         |  |
|               | SCHED                              | CODE   | FTE                        | B1*D1  | ALLOCATED<br>AMOUNT                        | BASIS                       |                         |  |
| 220           | MRI SCANNER                        | P4D    | MRI                        |        |  |                             |                         |  |
| 221           | LABOR AND DELIVERY                 | P4D    | DEL                        |        |  |                             |                         |  |
| 222           | OPERATING ROOM                     | P4D    | OR                         |        |  |                             |                         |  |
| 223           | OPERATING ROOM CLINIC              | P4D    | ORC                        |        |  |                             |                         |  |
| 224           | ANESTHESIOLOGY                     | P4D    | ANS                        |        |  |                             |                         |  |
| 225           | LABORATORY SERVICES                | P4D    | LAB                        |        |  |                             |                         |  |
| 226           | ELECTROCARDIOGRAPHY                | P4D    | EKG                        |        |  |                             |                         |  |
| 227           | INTERVENTIONAL RAD/CARD            | P4E    | IRC                        |        |  |                             |                         |  |
| 228           | RADIOLOGY DIAGNOSTIC               | P4E    | RAD                        |        |  |                             |                         |  |
| 229           | CT SCANNER                         | P4E    | CAT                        |        |  |                             |                         |  |
| 230           | RADIOLOGY THERAPEUTIC              | P4E    | RAT                        |        |  |                             |                         |  |
| 231           | NUCLEAR MEDICINE                   | P4E    | NUC                        |        |  |                             |                         |  |
| 232           | RESPIRATORY THERAPY                | P4E    | RES                        |        |  |                             |                         |  |
| 233           | PULMONARY FUNCTION TESTING         | P4E    | PUL                        |        |  |                             |                         |  |
| 234           | ELECTROENCEPHALOGRAPHY             | P4F    | EEG                        |        |  |                             |                         |  |
| 235           | PHYSICAL THERAPY                   | P4F    | PTH                        |        |  |                             |                         |  |
| 236           | OCCUPATIONAL THERAPY               | P4F    | OTH                        |        |  |                             |                         |  |
| 237           | SPEECH LANG. PATHOLOGY             | P4F    | STH                        |        |  |                             |                         |  |
| 238           | RECREATIONAL THERAPY               | P4F    | REC                        |        |  |                             |                         |  |
| 239           | AUDIOLOGY                          | P4F    | AUD                        |        |  |                             |                         |  |
| 240           | OTHER PHYSICAL MEDICINE            | P4F    | OPM                        |        |  |                             |                         |  |
| 241           | RENAL DIALYSIS                     | P4G    | RDL                        |        |  |                             |                         |  |
| 242           | ORGAN ACQUISITION                  | P4G    | OA                         |        |  |                             |                         |  |
| 243           | LEUKOPHERESIS                      | P4G    | LEU                        |        |  |                             |                         |  |
| 244           | HYPERBARIC CHAMBER                 | P4G    | HYP                        |        |  |                             |                         |  |
| 245           | FREE STANDING EMG SERV             | P4G    | FSE                        |        |  |                             |                         |  |
| 246           | LITHOTRIPSY                        | P4G    | LIT                        |        |  |                             |                         |  |
| 247           | REHABILITATION                     | P4H    | RHB                        |        |  |                             |                         |  |
| 248           | TRANSURETHRAL MICROWAVE THER.      | P4H    | TMT                        |        |  |                             |                         |  |
| 249           | ONCOLOGY O/P CLINIC                | P4H    | OCL                        |        |  |                             |                         |  |
| 250           | TRANSURETHRAL NEEDLE ABLATION      | P4H    | TNA                        |        |  |                             |                         |  |
| 251           | PSYCH ADULT                        | P4H    | PAD                        |        |  |                             |                         |  |
| 252           | PSYCH CHILD/ADOLESCENT             | P4H    | PCD                        |        |  |                             |                         |  |
| 253           | PSYCH GERIATRIC                    | P4H    | PSG                        |        |  |                             |                         |  |
| 254           | INDIVIDUAL THERAPIES               | P4I    | ITH                        |        |  |                             |                         |  |
| 255           | GROUP THERAPIES                    | P4I    | GTH                        |        |  |                             |                         |  |
| 256           | PSYCH TESTING                      | P4I    | PST                        |        |  |                             |                         |  |
| 257           | EDUCATION                          | P4I    | PSE                        |        |  |                             |                         |  |
| 258           | OTHER THERAPIES                    | P4I    | OPT                        |        |  |                             |                         |  |
| 259           | ACTIVITIES THERAPIES               | P4I    | ATH                        |        |  |                             |                         |  |
| 260           | MEDICAL SURG ACUTE                 | P5A    | MSG                        |        |  |                             |                         |  |
| 261           | PEDIATRICS                         | P5A    | PED                        |        |  |                             |                         |  |
| 262           | PSYCHIATRIC ACUTE                  | P5A    | PSY                        |        |  |                             |                         |  |
| 263           | OBSTETRICS ACUTE                   | P5A    | OBS                        |        |  |                             |                         |  |
| 264           | DEFINITIVE OBSERVSTION             | P5A    | DEF                        |        |  |                             |                         |  |
| 265           | M/S INTENSIVE CARE                 | P5A    | MIS                        |        |  |                             |                         |  |
| 266           | CORONARY CARE                      | P5A    | CCU                        |        |  |                             |                         |  |



ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

| DISTRIBUTIONS |                               | CAFETERIA, PARKING ETC. ALLOCATION |        | DATA PROCESSING ALLOCATION |                  | COL. 5                        | COL. 6         | COL. 7        | COL. 8                  |
|---------------|-------------------------------|------------------------------------|--------|----------------------------|------------------|-------------------------------|----------------|---------------|-------------------------|
|               |                               | COL. 1                             | COL. 2 | COL. 3                     | COL. 4           | WAGES, SALARIES & F. BENEFITS | OTHER EXPENSES | DP ALLOCATION | COL. 2 + COL. 7         |
|               | SCHED                         | CODE                               | FTE    | B1*D1                      | ALLOCATED AMOUNT | BASIS                         |                |               | TOTAL ALLOCATED EXPENSE |
| 267           | PEDIATRIC INTENSIVE CARE      | P5B                                | PIC    |                            |                  |                               |                |               |                         |
| 268           | NEO-NATAL INTEN. CARE         | P5B                                | NEO    |                            |                  |                               |                |               |                         |
| 269           | BURN CARE                     | P5B                                | BUR    |                            |                  |                               |                |               |                         |
| 270           | PSYCHIATRIC INTEN. CARE       | P5B                                | PSI    |                            |                  |                               |                |               |                         |
| 271           | SHOCK TRAUMA                  | P5B                                | TRM    |                            |                  |                               |                |               |                         |
| 272           | ONCOLOGY                      | P5B                                | ONC    |                            |                  |                               |                |               |                         |
| 273           | NEWBORN NURSERY               | P5B                                | NUR    |                            |                  |                               |                |               |                         |
| 274           | PREMATURE NURSERY             | P5C                                | PRE    |                            |                  |                               |                |               |                         |
| 275           | INTERMEDIATE CARE             | P5C                                | ICC    |                            |                  |                               |                |               |                         |
| 276           | EMERGENCY SERVICES            | P5C                                | EMG    |                            |                  |                               |                |               |                         |
| 277           | CLINIC SERVICES               | P5C                                | CL     |                            |                  |                               |                |               |                         |
| 278           | PSYCH DAY/NIGHT CARE          | P5C                                | PDC    |                            |                  |                               |                |               |                         |
| 279           | SAME DAY SURGERY              | P5C                                | SDS    |                            |                  |                               |                |               |                         |
| 280           | MRI SCANNER                   | P5D                                | MRI    |                            |                  |                               |                |               |                         |
| 281           | LABOR AND DELIVERY            | P5D                                | DEL    |                            |                  |                               |                |               |                         |
| 282           | OPERATING ROOM                | P5D                                | OR     |                            |                  |                               |                |               |                         |
| 283           | OPERATING ROOM CLINIC         | P5D                                | ORC    |                            |                  |                               |                |               |                         |
| 284           | ANESTHESIOLOGY                | P5D                                | ANS    |                            |                  |                               |                |               |                         |
| 285           | LABORATORY SERVICES           | P5D                                | LAB    |                            |                  |                               |                |               |                         |
| 286           | ELECTROCARDIOGRAPHY           | P5D                                | EKG    |                            |                  |                               |                |               |                         |
| 287           | INTERVENTIONAL RAD/CARD       | P5E                                | IRC    |                            |                  |                               |                |               |                         |
| 288           | RADIOLOGY DIAGNOSTIC          | P5E                                | RAD    |                            |                  |                               |                |               |                         |
| 289           | CT SCANNER                    | P5E                                | CAT    |                            |                  |                               |                |               |                         |
| 290           | RADIOLOGY THERAPEUTIC         | P5E                                | RAT    |                            |                  |                               |                |               |                         |
| 291           | NUCLEAR MEDICINE              | P5E                                | NUC    |                            |                  |                               |                |               |                         |
| 292           | RESPIRATORY THERAPY           | P5E                                | RES    |                            |                  |                               |                |               |                         |
| 293           | PULMONARY FUNCTION TESTING    | P5E                                | PUL    |                            |                  |                               |                |               |                         |
| 294           | ELECTROENCEPHALOGRAPHY        | P5F                                | EEG    |                            |                  |                               |                |               |                         |
| 295           | PHYSICAL THERAPY              | P5F                                | PTH    |                            |                  |                               |                |               |                         |
| 296           | OCCUPATIONAL THERAPY          | P5F                                | OTH    |                            |                  |                               |                |               |                         |
| 297           | SPEECH LANG. PATHOLOGY        | P5F                                | STH    |                            |                  |                               |                |               |                         |
| 298           | RECREATIONAL THERAPY          | P5F                                | REC    |                            |                  |                               |                |               |                         |
| 299           | AUDIOLOGY                     | P5F                                | AUD    |                            |                  |                               |                |               |                         |
| 300           | OTHER PHYSICAL MEDICINE       | P5F                                | OPM    |                            |                  |                               |                |               |                         |
| 301           | RENAL DIALYSIS                | P5G                                | RDL    |                            |                  |                               |                |               |                         |
| 302           | ORGAN ACQUISITION             | P5G                                | OA     |                            |                  |                               |                |               |                         |
| 303           | LEUKOPHERESIS                 | P5G                                | LEU    |                            |                  |                               |                |               |                         |
| 304           | HYPERBARIC CHAMBER            | P5G                                | HYP    |                            |                  |                               |                |               |                         |
| 305           | FREE STANDING EMG SERV        | P5G                                | FSE    |                            |                  |                               |                |               |                         |
| 306           | LITHOTRIPSY                   | P5G                                | LIT    |                            |                  |                               |                |               |                         |
| 307           | REHABILITATION                | P5H                                | RHB    |                            |                  |                               |                |               |                         |
| 308           | TRANSURETHRAL MICROWAVE THER. | P5H                                | TMT    |                            |                  |                               |                |               |                         |
| 309           | ONCOLOGY O/P CLINIC           | P5H                                | OCL    |                            |                  |                               |                |               |                         |
| 310           | TRANSURETHRAL NEEDLE ABLATION | P5H                                | TNA    |                            |                  |                               |                |               |                         |
| 311           | ADULT PSYCH.                  | P5H                                | PAD    |                            |                  |                               |                |               |                         |
| 312           | PSYCH. CHILD/ADOLE.           | P5H                                | PCD    |                            |                  |                               |                |               |                         |
| 313           | PSYCH GERIATRICS              | P5H                                | PSG    |                            |                  |                               |                |               |                         |

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

FISCAL YEAR 6/30/18

| DISTRIBUTIONS | CAFETERIA, PARKING ETC. ALLOCATION |                | DATA PROCESSING ALLOCATION |                 | COL. 5<br>WAGES, SALARIES &<br>F. BENEFITS | COL. 6<br>OTHER<br>EXPENSES | COL. 7<br>DP ALLOCATION | COL. 8<br>COL. 2 + COL. 7<br>TOTAL ALLOCATED EXPENSE |      |
|---------------|------------------------------------|----------------|----------------------------|-----------------|--|-----------------------------|-------------------------|--|------|
|               | COL. 1<br>SCHED                    | COL. 2<br>CODE | COL. 3<br>FTE              | COL. 4<br>B1*D1 |  |                             |                         |  |      |
| 314           | INDIVIDUAL THERAPIES               | P5I            | ITH                        |                 |  |                             |                         |  |      |
| 315           | GROUP THERAPY                      | P5I            | GTH                        |                 |  |                             |                         |  |      |
| 316           | PSYCH TESTING                      | P5I            | PST                        |                 |  |                             |                         |  |      |
| 317           | EDUCATION                          | P5I            | PSE                        |                 |  |                             |                         |  |      |
| 318           | OTHER THERAPIES                    | P5I            | OPT                        |                 |  |                             |                         |  |      |
| 319           | ACTIVITY THERAPIES                 | P5I            | ATH                        |                 |  |                             |                         |  |      |
| 320           | FREE STANDING CLINIC               | UR1            | FSC                        |                 |  |                             |                         |  |      |
| 321           | HOME HEALTH SERVICE                | UR2            | HHC                        |                 |  |                             |                         |  |      |
| 322           | RENAL DIALYSIS O/P                 | UR3            | ORD                        |                 |  |                             |                         |  |      |
| 323           | SKILLED NURSING CARE               | UR4            | ECF                        |                 |  |                             |                         |  |      |
| 324           | LABORATORY-NON PATIENT             | UR5            | ULB                        |                 | 44.0                                       | 0.008                       | 1.8                     | 2.2  | 4.0  |
| 325           | PHYS. PART B SERVICES              | UR6            | UPB                        |                 | 214.0                                      | 0.038                       | 8.7                     | 10.6   | 19.3 |
| 326           | PSYCH ADULT                        | P3H            | PAD                        |                 |  |                             |                         |  |      |
| 327           | PSYCH CHILD/ADOLESCENT             | P3H            | PCD                        |                 |  |                             |                         |  |      |
| 328           | PSYCH GERIATRICS                   | P3H            | PSG                        |                 |  |                             |                         |  |      |
| 329           | INDIVIDUAL THERAPIES               | P3I            | ITH                        |                 |  |                             |                         |  |      |
| 330           | GROUP THERAPIES                    | P3I            | GTH                        |                 |  |                             |                         |  |      |
| 331           | PSYCH TESTING                      | P3I            | PST                        |                 |  |                             |                         |  |      |
| 332           | EDUCATION                          | P3I            | PSE                        |                 |  |                             |                         |  |      |
| 333           | OTHER THERAPIES                    | P3I            | OPT                        |                 |  |                             |                         |  |      |
| 334           | ACTIVITY THERAPIES                 | P3I            | ATH                        |                 |  |                             |                         |  |      |
| 335           | CERT NURSE ANESTH.                 | UR7            | CNA                        |                 |  |                             |                         |  |      |
|               |                                    | UR8            | NP                         |                 |  |                             |                         |  |      |
| 336           | POCOMOKE IMAGING                   | UR9            | POC                        |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |
|               |                                    |                |                            |                 |  |                             |                         |  |      |

RECONCILIATION OF BASE YEAR EXPENSES  
AND BUDGET YEAR EXPENSES  
TO SCHEDULE RE

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|          |                                    |   | COL. 1          | COL. 2      | COL. 3   |
|----------|------------------------------------|---|-----------------|-------------|----------|
| EXPENSES |                                    | SOURCE  | HSCRC REGULATED | UNREGULATED | TOTAL    |
| A        | UNASSIGNED EXPENSE                 | SCH UA, LINES C & - B, COL 10                     | 1,410.4         | 22.5        | 1,432.9  |
| B        | PHYSICIAN PART B SERVICES          | SCH UR6, (LINE B, COL 3)<br>SCH P2, LINE A, COL 7 | 0.0             | 1,014.6     | 1,014.6  |
| C        | PHYSICIAN SUPPORT SERVICES         | SCH UR, LINE B, COL 3 & SCH<br>P3, LINE A, COL 7  | 0.0             | 0.0         | 0.0      |
| D        | RESIDENT INTERN SERVICES           | SCH P4&P5, LINE D, COL 7                          | 0.0             | 0.0         | 0.0      |
| E        | OVERHEAD EXPENSE SURVEY            | SCH OES, LINE P, COL 1                            | 5,305.5         | 23.3        | 5,328.8  |
| F        | PATIENT CARE CENTERS               | SCH D1-81, LINE B, COL 4                          | 9,075.6         | XXXXXX      | 9,075.6  |
| G        | AUXILLARY ENTERPRISES              | SCH E1-9, LINE B, COL 3                           | 0.0             | 0.0         | 0.0      |
| H        | OTHER INSTITUTIONAL PROG.          | SCH F1-4, LINE B, COL 3                           | XXXXXX          | 0.0         | 0.0      |
| I        | UNREGULATED SERVICES               | SCH UR1-UR10, LINE B, COL 3                       | XXXXXX          | 104.0       | 104.0    |
| J        | TOTAL OPERATING EXPENSES           | A+B+C+D+E+F+G+H+I                                 | 15,791.6        | 1,164.3     | 16,955.9 |
| K        | NON-OPERATING EXPENSES             |   |                 |             | 0.0      |
| L        | TOTAL EXPENSES                     | LINES J + K                                       | 15,791.6        | 1,164.3     | 16,955.9 |
| M        | TOTAL OPERATING EXPENSES - RE SCH  | SCH RE, LINE S                                    | 15,791.6        | 1,164.3     | 16,955.9 |
| N        | NON-OPERATING EXPENSES             | SCH RE LINE V                                     | XXXXXX          | 0.0         | 0.0      |
| O        | TOTAL EXPENSES - RE SCHEDULE       | LINE M + LINE N                                   | 15,791.6        | 1,164.3     | 16,955.9 |
| P        | RECONCILIATION AMOUNT              | LINE O - LINE L                                   | 0.0             | 0.0         | 0.0      |
| Q        | NOMENCLATURE - RECONCILIATION COMP | XXXXXX  | XXXXXX          | XXXXXX      | XXXXXX   |
| Q1       |                                    |   |                 |             |          |
| Q2       |                                    |   |                 |             |          |
| Q3       |                                    |   |                 |             |          |
| Q4       |                                    |   |                 |             |          |
| Q5       |                                    |   |                 |             |          |
| Q6       |                                    |   |                 |             |          |

## STATEMENT OF REVENUE AND EXPENSES

RE

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

COLUMN 1 COLUMN 2 COLUMN 3  
 REGULATED UNREGULATED TOTAL

## OPERATING REVENUES

|   |                                       |          |         |          |   |
|---|---------------------------------------|----------|---------|----------|---|
| A | GROSS REV FROM DAILY HOSP SERVICES    | 1,078.6  | 0.0     | 1,078.6  | A |
| B | GROSS REV FROM AMBULATORY SERVICES    | 3,661.1  | 3,021.3 | 6,682.4  | B |
| C | GROSS REV FROM I/P ANCILLARY SERVICES | 1,623.7  | 0.0     | 1,623.7  | C |
| D | GROSS REV FROM O/P ANCILLARY SERVICES | 10,783.9 | 8.5     | 10,792.4 | D |
| E | GROSS PATIENT REVENUES                | 17,147.3 | 3,029.8 | 20,177.1 | E |

## DEDUCTIONS FROM REVENUES

|    |                                  |          |         |          |    |
|----|----------------------------------|----------|---------|----------|----|
| F  | PROVISION FOR BAD DEBTS          | 700.0    | 32.1    | 732.1    | F  |
| G  | CHARITY/UNCOMPENSATED CARE       | 290.8    | 35.2    | 326.0    | G  |
| H  | CONTRACTUAL ADJUSTMENTS          | 1,429.0  | 864.2   | 2,293.2  | H  |
| H1 | UNCOMPENSATED CARE FUND PAYMENTS | 420.4    | 0.0     | 420.4    | H1 |
| H2 | DENIALS                          | 393.6    | 0.0     | 393.6    | H2 |
| I  | OTHER DEDUCTIONS FROM REVENUES   | 0.0      | 0.0     | 0.0      | I  |
| J  | TOTAL DEDUCTIONS FROM REVENUES   | 3,233.8  | 931.6   | 4,165.3  | J  |
| J1 | UNCOMPENSATED CARE FUND RECEIPTS | 0.0      | 0.0     | 0.0      | J1 |
| K  | NET PATIENT REVENUES             | 13,913.5 | 2,098.2 | 16,011.8 | K  |
| L  | OTHER OPERATING REVENUES         | 182.9    | 7.6     | 190.5    | L  |
| M  | NET OPERATING REVENUES           | 14,096.4 | 2,105.8 | 16,202.2 | M  |

## OPERATING EXPENSES

|   |   |           |         |          |   |
|---|---|-----------|---------|----------|---|
| N | SALARIES, WAGES AND EMPLOYEE BENEFITS           | 8,407.0   | 608.2   | 9,015.2  | N |
| O | PROFESSIONAL FEES                               | 1,849.2   | 250.2   | 2,099.4  | O |
| P | SUPPLIES  | 1,587.7   | 10.5    | 1,598.2  | P |
| Q | DEPRECIATION/AMORT.,LEASES/RENTALS              | 1,099.7   | 158.5   | 1,258.2  | Q |
| R | OTHER EXPENSES                                  | 2,847.9   | 137.0   | 2,984.9  | R |
| S | TOTAL OPERATING EXPENSES                        | 15,791.6  | 1,164.3 | 16,955.9 | S |
| T | EXCESS (DEFECIT) OPER. REV. OVER OPER. EXP      | (1,695.1) | 941.5   | (753.6)  | T |
| U | NON-OPER. REVENUES                              | XXXXXXX   | 63.6    | 63.6     | U |
| V | NON-OPER. EXPENSES                              | XXXXXXX   | 0.0     | 0.0      | V |
| W | EXCESS (DEFICIT) REVENUES OVER EXPENSES         | (1,695.1) | 1,005.1 | (690.0)  | W |
| X | OPERATING EXPENSES PER EIPD                     | 3.16621   | XXXXXXX | XXXXXXX  | X |
| Y | OPERATING EXPENSES, PER EIPA                    | 11.01170  | XXXXXXX | XXXXXXX  | Y |
| Z | WORKING CAPITAL RATIO = CURR. ASSETS/CURR. LIAB | 2.13      | XXXXXXX | XXXXXXX  | Z |

|    |            |       |   |       |    |
|----|------------|-------|---|-------|----|
| AA | ADMISSIONS | 226   | 0 | 226   | AA |
| BB | EIPA'S     | 1,434 | 0 | 1,687 | BB |

**SUPPLEMENT TO SCHEDULE RE**

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

**Detail for Line L Column 1, Other Operating Revenue Regulated**

|  |              |
|--|--------------|
| Vendor rebate income                       | 0.0          |
| Vending income                             | 32.8         |
| Medical records                            | 11.5         |
| Hospital EMR Incentive - Medicare/Medicaid | 0.1          |
| Miscellaneous                              | 138.5        |
|  | <u>182.9</u> |

**Detail for Line L Column 2, Other Operating Revenue Unregulated**

|                                     |            |
|-------------------------------------|------------|
| Miscellaneous                       | 7.6        |
| Physicians EMR Incentive - Medicare | 0.0        |
|                                     | <u>7.6</u> |

**Detail for Line U Column 2, Non-Operating Revenue**

|   |             |
|---|-------------|
| Investment income - dividends/interest income   | 8.7         |
| Contributions and donations   | 54.9        |
| Other non-operating revenue (vending, discounts, medical staff credentialing, auxillary dues, etc.) | 0.0         |
|   | <u>63.6</u> |

SCHEDULE RE-R  
 RECONCILIATION OF THE AUDITED FINANCIAL STATEMENTS  
 TO SCHEDULE RE

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045  
 FISCAL YEAR 6/30/18

|                                  | Audited<br>Financial<br>Statements | Misc.<br>Adjustments* | AUXILIARY ADJUSTMENTS |    |    |    |                 |                      |                 | UNREGULATED    |       |                      |                   |                     | TOTAL<br>AUXILIARY &<br>UNREGULATED | NONOPERATING<br>& UNREGULATED<br>ADJUSTMENTS | SCHEDULE<br>RE, col.1 | RE<br>LINE |
|----------------------------------|------------------------------------|-----------------------|-----------------------|----|----|----|-----------------|----------------------|-----------------|----------------|-------|----------------------|-------------------|---------------------|-------------------------------------|--|-----------------------|------------|
|                                  |                                    |                       | E1                    | E2 | E3 | E4 | Gift Shop<br>E5 | Pt. Telephones<br>E6 | Cafeteria<br>E7 | Clinic<br>UR01 | UR3   | Subacute Unit<br>UR4 | Unreg Lab<br>UR05 | Part B Phys<br>UR06 |                                     |  |                       |            |
| Gross patient revenue            | 20,177.1                           |                       |                       |    |    |    |                 |                      |                 |                | 376.9 | 8.5                  | 2,644.4           |                     | 3,029.8                             |  | 17,147.3              | E          |
| Provisions for bad debts         | 1,152.5                            |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     | 32.1                                |  | 1,120.4               | F          |
| Charity care                     | 326.0                              |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     | 35.2                                |  | 290.8                 | G          |
| Contractual allowances           | 2,686.8                            |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     | 864.2                               |  | 1,822.6               | H, H1, I   |
| Total deductions                 | 4,165.3                            |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     | 931.6                               |  | 3,233.8               | J          |
| Net patient revenue              | 16,011.8                           |                       |                       |    |    |    |                 |                      |                 |                | 376.9 | 8.5                  | 1,712.8           |                     | 2,098.2                             |  | 13,913.6              | K          |
| Other operating revenue          | 190.5                              |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     | 7.6                                 |  | 182.9                 | L          |
| Total operating revenues         | 16,202.2                           |                       |                       |    |    |    |                 |                      |                 |                | 376.9 | 16.1                 | 1,712.8           |                     | 2,105.8                             |  | 14,096.5              | M          |
| Operating expenses               |                                    |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     |                                     |  |                       |            |
| Salaries, wages, & benefits      | 9,015.2                            |                       |                       |    |    |    |                 |                      |                 |                |       | 33.9                 | 574.3             |                     | 608.2                               |  | 8,407.0               | N          |
| Professional fees                | 2,099.4                            |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     | 250.2                               |  | 1,849.2               | O          |
| Supplies & drugs                 | 1,598.2                            |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     | 10.5                                |  | 1,587.7               | P          |
| Depreciation/amortization        | 815.6                              |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     | 146.9                               |  | 668.7                 | Q          |
| Leases/rentals                   | 442.6                              |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     | 11.6                                |  | 431.1                 | Q          |
| Interest                         | 87.7                               |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     | 1.6                                 |  | 86.1                  | R          |
| Other expenses                   | 2,897.2                            |                       |                       |    |    |    |                 |                      |                 |                |       | 74.1                 | 61.3              |                     | 135.4                               |  | 2,761.9               | R          |
| Total operating expenses         | 16,955.9                           |                       |                       |    |    |    |                 |                      |                 |                | (0.0) | 107.9                | 1,056.4           |                     | 1,164.3                             |  | 15,791.6              | S          |
| Income from operations           | (753.6)                            |                       |                       |    |    |    |                 |                      |                 |                | 376.9 | (91.9)               | 656.4             |                     | 941.5                               |  | (1,695.1)             | T          |
| Non-operating revenues           | 63.6                               |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     |                                     | 63.6   |                       | U          |
| Non-operating expenses           |                                    |                       |                       |    |    |    |                 |                      |                 |                |       |                      |                   |                     |                                     |  |                       | V          |
| Excess of revenues over expenses | (690.0)                            |                       |                       |    |    |    |                 |                      |                 |                | 376.9 | (91.9)               | 656.4             |                     | 941.5                               |  | (1,695.1)             | W          |

\*provide details

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

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

**Income Statement**

|   |   |        |        |
|---|---|--------|--------|
| RE Line T                               | Excess (Deficit) Operating Rev. over Operating Expenses   | XXXXXX | -753.6 |
| RE Line U Detailed Non-Operating Income |   |        |        |
| U1                                      | Contributions (Unrestricted)  | 54.9   | XXXXXX |
| U2                                      | Interest & Investment Income  | 8.7    | XXXXXX |
| U3                                      | Investment - Gains/Losses - Realized  |        | XXXXXX |
| U4                                      | Investment - Gains/Losses - Unrealized  |        | XXXXXX |
| U5                                      | Swap Agreements - Gains/(Losses) - Realized   | 0.0    | XXXXXX |
| RE Line V Other:                        |   |        | XXXXXX |
|   | Other non-operating revenue (vending, discounts, medical staff credentialing, auxillary dues, etc.) |        | XXXXXX |
| RE Line W Excess Profit/(Loss)          |   | XXXXXX | -690.0 |

**Supplemental Schedule - FS and RE Schedules**  
**Other Significant Financial Information**

|    |  |        |        |
|----|--|--------|--------|
| CC | Swap Agreements - Gains/(Losses) - Unrealized                          | 0.0    | XXXXXX |
| DD | Collateral Received/(Posted) - Swap Agreements                         | 0.0    | XXXXXX |
| EE | Retirement of Debt - Gains/(Losses)                                    | 0.0    | XXXXXX |
| FF | Pension Adjustments - Defined Benefit Plans                            | 0.0    | XXXXXX |
| GG | Other (Specify):   |        | XXXXXX |
|    | Loss on sale of donated property                                       | 0.0    | XXXXXX |
|    | Net Assets Released from Restrictions<br>Used for Capital Acquisitions | 0.0    | XXXXXX |
| HH | Total  | XXXXXX | 0.0    |

| ALLOCATED CENTERS                 | Col. 1  | Col. 2            | Col. 3                | Col. 4        | Col. 5                           | Col. 6           | Col. 7                      | Col. 8                         | Col. 8A                             | Col. 9                      | Col. 10              | Col. 11             | Col. 12              | Col. 13                  |         |
|-----------------------------------|---------|-------------------|-----------------------|---------------|----------------------------------|------------------|-----------------------------|--------------------------------|-------------------------------------|-----------------------------|----------------------|---------------------|----------------------|--------------------------|---------|
|                                   | Dietary | Laundry and Linen | Purchasing and Stores | House-keeping | Cent. Supply, Pharm & Soc. Serv. | Plant Operations | Total Patient Care Overhead | I/P-PAC MRD, FIS, Gen MGT, NAD | AMBULATORY PPAC, MRD, FIS, MGT, NAD | O/P-PAC, MRD, FIS, MGT, NAD | Medical Staff Admin. | Unassigned Expenses | Total Other Overhead | Total Allocated Overhead |         |
| A Overhead Expenses               | 28.7    | 30.4              | 44.3                  | 354.0         | 244.8                            | 1,057.9          | 1,760.0                     | 399.1                          | 1,352.1                             | 1,486.4                     | 2.6                  | 224.6               | 3,464.8              | 5,224.7                  |         |
| REVENUE CENTERS                   | CODE    |                   |                       |               |                                  |                  |                             |                                |                                     |                             |                      |                     |                      |                          |         |
| B1 Medical Surgical Acute         | MSG     | 22.3              | 17.2                  | 1.5           | 72.8                             | //////           | 212.1                       | 325.7                          | 199.8                               | //////                      | (0.0)                | //////              | 19.7                 | 219.5                    | 545.2   |
| B2 Pediatric Acute                | PED     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B2      |
| B3 Psychiatric Acute              | PSY     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B3      |
| B4 Obstetrics Acute               | OBS     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B4      |
| B5 Definitive Observation         | DEF     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B5      |
| B6 Medical Surgical ICU           | MIS     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B6      |
| B7 Coronary Care                  | CCU     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B7      |
| B8 Pediatric ICU                  | PIC     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B8      |
| B9 Neo Natal ICU                  | NEO     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B9      |
| B10 Burn Care                     | BUR     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B10     |
| B11 Psychiatric ICU               | PSI     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B11     |
| B12 Shock Trauma                  | TRM     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B12     |
| B13 Oncology                      | ONC     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B13     |
| B14 New Born Nursery              | NUR     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B14     |
| B15 Oncology Clinic               | OCL     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B15     |
| B16 Premature Nursery             | PRE     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B16     |
| B17 Rehabilitation                | RHB     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B17     |
| B18 Intermediate Care             | ICC     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B18     |
| B19 Emergency Services            | EMG     |                   | 1.8                   | 4.0           | 32.9                             | //////           | 98.3                        | 137.0                          | 47.0                                | 626.9                       | //////               | 0.7                 | 50.3                 | 724.8                    | 861.9   |
| B20 Clinic Services               | CL      | //////            | 0.5                   | 4.1           | 94.9                             | //////           | 283.8                       | 383.3                          |                                     | 584.7                       | //////               | 1.1                 | 48.1                 | 633.9                    | 1,017.2 |
| B21 Observation                   | OBV     | 6.4               | 8.5                   | 1.9           | 30.4                             | //////           | 90.9                        | 138.0                          |                                     | 78.6                        | //////               | 0.2                 | 7.9                  | 86.7                     | 224.8   |
| B21 Psychiatric Day & Night Care  | PDC     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B21     |
| B22 Lithotripsy                   | LIT     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B22     |
| B23 Same Day Surgery              | SDS     |                   |                       | 0.1           | 3.5                              | //////           | 10.4                        | 13.9                           |                                     | 47.0                        | //////               | 0.2                 | 3.6                  | 50.8                     | 64.7    |
| B24 Free Standing Emergency       | FSE     |                   |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B24     |
| B25 Labor and Delivery            | DEL     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B25     |
| B26 Operating Room                | OR      | //////            | 5.0                   | 1.5           | //////                           |                  |                             | 6.5                            | 9.8                                 | //////                      | 86.0                 | //////              | 5.1                  | 100.8                    | 107.4   |
| B27 Operating Room Clinic         | ORC     | //////            |                       | 0.2           | 1.9                              | //////           | 5.8                         | 7.9                            | 0.2                                 | //////                      | 19.1                 | //////              | 1.1                  | 20.3                     | 28.2    |
| B28 Med/Surg Extraordinary        | MSE     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B28     |
| B29 Anesthesiology                | ANS     | //////            |                       | 0.8           | 18.6                             | //////           | 55.5                        | 74.8                           | 13.3                                | //////                      | 140.2                | //////              | 9.2                  | 162.7                    | 237.5   |
| B30 Laboratory                    | LAB     | //////            |                       | 17.0          | 18.7                             | //////           | 55.8                        | 91.4                           | 55.1                                | //////                      | 537.4                | //////              | 32.1                 | 624.6                    | 716.0   |
| B31 Blood                         | BB      | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B31     |
| B32 Electrocardiography           | EKG     | //////            |                       | 0.1           | 0.9                              | //////           | 2.7                         | 3.6                            | 2.1                                 | //////                      | 23.6                 | //////              | 1.4                  | 27.1                     | 30.7    |
| B33 Electroencephalography        | EEG     | //////            |                       |               | 0.9                              | //////           | 2.7                         | 3.5                            |                                     | //////                      |                      | //////              | 0.1                  | 0.1                      | 3.6     |
| B34 Radiology-Diagnostic          | RAD     | //////            | 5.9                   | 4.7           | 33.2                             | //////           | 99.2                        | 142.9                          | 13.1                                | //////                      | 317.7                | //////              | 19.1                 | 349.9                    | 492.8   |
| B35 Radiology-Therapeutic         | RAT     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B35     |
| B36 Nuclear Medicine              | NUC     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B36     |
| B37 CT Scanner                    | CAT     | //////            |                       | 2.4           | 5.8                              | //////           | 17.4                        | 25.6                           | 6.8                                 | //////                      | 67.3                 | //////              | 4.2                  | 78.3                     | 103.9   |
| B38 Interventional Cardiovascular | IRC     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B38     |
| B39 Respiratory Therapy           | RES     | //////            |                       | 2.3           | 2.9                              | //////           | 8.7                         | 13.9                           | 30.0                                | //////                      | 48.0                 | //////              | 4.7                  | 82.7                     | 96.6    |
| B40 Pulmonary Function Testing    | PUL     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B40     |
| B41 Renal Dialysis                | RDL     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B41     |
| B42 Physical Therapy              | PTH     | //////            | 2.5                   | 2.2           | 27.7                             | //////           | 82.7                        | 115.1                          | 6.4                                 | //////                      | 147.6                | //////              | 9.7                  | 163.7                    | 278.9   |
| B43 Occupational Therapy          | OTH     | //////            |                       | 0.0           | 3.2                              | //////           | 9.7                         | 12.9                           | 2.7                                 | //////                      | 15.7                 | //////              | 1.2                  | 19.6                     | 32.5    |
| B44 Speech Therapy                | STH     | //////            |                       | 0.2           | 1.6                              | //////           | 4.8                         | 6.7                            | 0.7                                 | //////                      | 11.4                 | //////              | 0.7                  | 12.8                     | 19.5    |
| B45 Organ Acquisition             | OA      | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B45     |
| B46 Ambulatory Surgery            | AOR     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B46     |
| B47 Leukopheresis                 | LEU     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B47     |
| B48 Hyperbaric Chamber            | HYP     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B48     |
| B49 Audiology                     | AUD     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B49     |
| B50 Other Physical Medicine       | OPM     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B50     |
| B51 MRI Scanner                   | MRI     | //////            |                       | 0.0           | 3.5                              | //////           | 10.3                        | 13.8                           | 1.2                                 | //////                      | (0.0)                | //////              | 0.3                  | 1.6                      | 15.3    |
| B52 Transurethral Micro Therm     | TMT     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B52     |
| B53 Transurethral Nd/Ablation     | TNA     | //////            |                       |               | //////                           |                  |                             |                                |                                     | //////                      |                      |                     |                      |                          | B53     |
| B54 Admission's Services          | ADM     | //////            | //////                | //////        | //////                           |                  | 20.3                        | 7.4                            | 27.7                                |                             |                      | 0.4                 | //////               | 0.4                      | 28.1    |
| B55 Medical Supplies              | MSS     | //////            | //////                | //////        | //////                           |                  | 16.8                        | //////                         | 16.8                                | 0.8                         | 1.1                  | 5.4                 | //////               | 7.8                      | 24.6    |
| B56 Drugs                         | CDS     | //////            | //////                | //////        | //////                           |                  | 207.7                       | //////                         | 207.7                               | 10.1                        | 13.7                 | 67.0                | //////               | 5.0                      | 95.9    |
| B57 Ambulance                     | AMR     | //////            |                       | 1.3           | //////                           |                  |                             | 1.3                            | //////                              |                             |                      | //////              | 1.0                  | 1.0                      | 2.3     |
| C Total Allocated Expenses        |         | 28.7              | 41.3                  | 44.3          | 353.3                            | 244.8            | 1,057.9                     | 1,770.2                        | 399.1                               | 1,352.1                     | 1,486.4              | 2.6                 | 224.8                | 3,464.9                  | 5,235.1 |
| D Transfer to Sch. M. MA          |         | //////            | //////                | //////        | //////                           | //////           | //////                      | Col. 3                         | //////                              | //////                      | //////               | //////              | //////               | Col. 4                   | //////  |



| UNIT COST CALCULATIONS    |                               | Col. 1   | Col. 2          | Col. 3               | Col. 4        | Col. 5                                | Col. 6           | Col. 7                     | Col. 7A                            | Col. 8                      | Col. 9              | Col. 10             |        |     |
|---------------------------|-------------------------------|----------|-----------------|----------------------|---------------|---------------------------------------|------------------|----------------------------|------------------------------------|-----------------------------|---------------------|---------------------|--------|-----|
|                           |                               | DIETARY  | LAUNDRY & LINEN | PURCHAS-ING & STORES | HOUSE-KEEPING | CEN. SUPPLY, PHARMACY & SOC. SERVICES | PLANT OPERATIONS | I/P-PAC, MRD, FIS, MGT NAD | AMBULATORY PAC, MRD, FIS, MGT, NAD | O/P-PAC, MRD, FIS, MGT, NAD | MEDICAL STAFF ADMIN | UNASSIGNED EXPENSES |        |     |
| A                         | Overhead Expenses             | 28.7     | 30.4            | 44.3                 | 354.0         | 244.8                                 | 1,057.9          | 399.1                      | 1,352.1                            | 1,486.4                     | 2.6                 | 224.6               | A      |     |
| B                         | Units                         | 5,820    | 50,597          | 1,908                | 19,032        | ////////                              | 17,537           | 1,290                      | 4,371                              | 2,897                       | 1,434               | 13,362              | B      |     |
| C                         | Cost Per Unit                 | 0.004923 | 0.000600        | 0.023206             | 0.018598      | ////////                              | 0.060324         | 0.309341                   | 0.309341                           | 0.513031                    | 0.001846            | 0.016809            | C      |     |
| STATISTICAL APPORTIONMENT |                               |          |                 |                      |               |                                       |                  |                            |                                    |                             |                     |                     |        |     |
| D1                        | Medical Surgical Acute        | MSG      | 4,524           | 28,683               | 63            | 3,815                                 | ////////         | 3,515                      | 646                                | 0                           | ////////            | 1,171               | D1     |     |
| D2                        | Pediatric Acute               | PED      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D2     |     |
| D3                        | Psychiatric Acute             | PSY      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D3     |     |
| D4                        | Obstetrics Acute              | OBS      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D4     |     |
| D5                        | Definitive Observation        | DEF      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D5     |     |
| D6                        | Medical Surgical ICU          | MIS      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D6     |     |
| D7                        | Coronary Care                 | CCU      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D7     |     |
| D8                        | Pediatric ICU                 | PIC      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D8     |     |
| D9                        | Neo Natal ICU                 | NEO      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D9     |     |
| D10                       | Burn Care                     | BUR      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D10    |     |
| D11                       | Psychiatric ICU               | PSI      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D11    |     |
| D12                       | Shock Trauma                  | TRM      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D12    |     |
| D13                       | Oncology                      | ONC      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D13    |     |
| D14                       | Newborn Nursery               | NUR      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D14    |     |
| D15                       | Oncology Clinic               | OCL      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D15    |     |
| D16                       | Premature Nursery             | PRE      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D16    |     |
| D17                       | Rehabilitation                | RHB      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D17    |     |
| D18                       | Intermediate Care             | ICC      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D18    |     |
| D19                       | Emergency Services            | EMG      |                 | 2,953                | 173           | 1,769                                 | ////////         | 1,630                      | 152                                | 2,027                       | 381                 | 2,990               | D19    |     |
| D20                       | Clinic Services               | CL       | ////////        | 822                  | 175           | 5,105                                 | ////////         | 4,704                      |                                    | 1,890                       | 606                 | 2,859               | D20    |     |
| D21                       | Observation                   | OBV      | 1,296           | 14,127               | 82            | 1,635                                 | ////////         | 1,507                      |                                    | 254                         | 101                 | 471                 | D21    |     |
| D22                       | Psychiatric Day & Night Care  | PDC      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D22    |     |
| D22                       | Lithotripsy                   | LIT      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D22    |     |
| D23                       | Same Day Surgery              | SDS      |                 |                      | 3             | 187                                   | ////////         | 172                        |                                    | 152                         |                     | 213                 | D23    |     |
| D24                       | Free Standing Emergency       | FSE      |                 |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D24    |     |
| D25                       | Labor and Delivery            | DEL      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D25    |     |
| D26                       | Operating Room                | OR       | ////////        | 8,295                | 67            |                                       | ////////         | 32                         |                                    | 168                         | ////////            | 302                 | D26    |     |
| D27                       | Operating Room Clinic         | ORC      | ////////        |                      | 8             | 104                                   | ////////         | 96                         | 1                                  | 37                          | ////////            | 65                  | D27    |     |
| D28                       | Med/Surg Extraordinary        | MSE      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D28    |     |
| D29                       | Anesthesiology                | ANS      | ////////        |                      | 33            | 998                                   | ////////         | 920                        | 43                                 | 273                         | ////////            | 545                 | D29    |     |
| D30                       | Laboratory                    | LAB      | ////////        |                      | 731           | 1,004                                 | ////////         | 925                        | 178                                | 1,047                       | ////////            | 1,909               | D30    |     |
| D31                       | Blood                         | BB       | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D31    |     |
| D32                       | Electrocardiography           | EKG      | ////////        |                      | 3             | 48                                    | ////////         | 44                         | 7                                  | 46                          | ////////            | 82                  | D32    |     |
| D33                       | Electroencephalography        | EEG      | ////////        |                      |               | 48                                    | ////////         | 44                         |                                    |                             | ////////            | 4                   | D33    |     |
| D34                       | Radiology-Diagnostic          | RAD      | ////////        | 9,827                | 202           | 1,784                                 | ////////         | 1,644                      | 42                                 | 619                         | ////////            | 1,135               | D34    |     |
| D35                       | Radiology-Therapeutic         | RAT      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D35    |     |
| D36                       | Nuclear Medicine              | NUC      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D36    |     |
| D37                       | CT Scanner                    | CAT      | ////////        |                      | 104           | 313                                   | ////////         | 288                        | 22                                 | 131                         | ////////            | 253                 | D37    |     |
| D38                       | Interventional Cardiovascular | IRC      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D38    |     |
| D39                       | Respiratory Therapy           | RES      | ////////        |                      | 101           | 156                                   | ////////         | 144                        | 97                                 | 94                          | ////////            | 282                 | D39    |     |
| D40                       | Pulmonary Function Testing    | PUL      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D40    |     |
| D41                       | Renal Dialysis                | RDL      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D41    |     |
| D42                       | Physical Therapy              | PTH      | ////////        | 4,166                | 96            | 1,488                                 | ////////         | 1,371                      | 21                                 | 288                         | ////////            | 578                 | D42    |     |
| D43                       | Occupational Therapy          | OTH      | ////////        |                      | 0             | 174                                   | ////////         | 160                        | 9                                  | 31                          | ////////            | 71                  | D43    |     |
| D44                       | Speech Therapy                | STH      | ////////        |                      | 11            | 87                                    | ////////         | 80                         | 2                                  | 22                          | ////////            | 43                  | D44    |     |
| D45                       | Organ Acquisition             | OA       | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D45    |     |
| D46                       | Ambulatory Surgery            | AOR      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D46    |     |
| D47                       | Leukopheresis                 | LEU      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D47    |     |
| D48                       | Hyperbaric Chamber            | HYP      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D48    |     |
| D49                       | Audiology                     | AUD      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D49    |     |
| D50                       | Other Physical Medicine       | OPM      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D50    |     |
| D51                       | MRI Scanner                   | MRI      | ////////        |                      | 0             | 186                                   | ////////         | 171                        | 4                                  | 0                           | ////////            | 19                  | D51    |     |
| D52                       | Transurethral Micro Therm     | TMT      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D52    |     |
| D53                       | Transurethral NdI/Ablation    | TNA      | ////////        |                      |               |                                       | ////////         |                            |                                    |                             | ////////            |                     | D53    |     |
| D54                       | Admission's Services          | ADM      | ////////        | ////////             | ////////      | ////////                              | 20.3             | 122                        |                                    |                             | 226                 | ////////            | D54    |     |
| D55                       | Medical Supplies              | MSS      | ////////        | ////////             | ////////      | ////////                              | 16.8             | ////////                   | 3                                  | 4                           | 11                  | ////////            | 24     | D55 |
| D56                       | Drugs                         | CDS      | ////////        | ////////             | ////////      | ////////                              | 207.7            | ////////                   | 33                                 | 44                          | 131                 | ////////            | 299    | D56 |
| D57                       | Ambulance                     | AMR      | ////////        |                      | 55            |                                       | ////////         |                            |                                    |                             | ////////            |                     | 58     | D57 |
| E                         | Total Statistics              | XYZ      | 5,820           | 68,873               | 1,908         | 18,900                                | ////////         | 17,537                     | 1,290                              | 4,371                       | 2,897               | 1,434               | 13,372 | E   |

## DEPARTMENTAL EQUIPMENT ALLOWANCE

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|        |     | COL 1     | COL 2 | COL 3      | COL 4        | COL 5     | COL 6      | COL 7         | COL 8       |
|--------|-----|-----------|-------|------------|--------------|-----------|------------|---------------|-------------|
|        |     | COST      |       | CUMULATIVE |              | MKT VALUE | CUMULATIVE | LEASE         | DEPR/AMORT  |
|        |     | BASE YEAR | # YRS | PURCHASE   | DEPRECIATION | BASE YEAR | LEASES     | AMORITIZATION | TOTAL       |
| CENTER |     | PURCHASES |       | TOTAL      | COL 3/COL 2  | LEASES    | TOTAL      | COL 6/COL 2   | COL 4+COL 7 |
| H2 A   | MIS | 0.0       | 10    | 0.0        | 0.0          |           |            | 0.0           | 0.0         |
| H2 B   | CCU |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 C   | PIC |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 D   | NEO |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 E   | BUR |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 F   | TRM |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 G   | ONC |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 H   | OR  | 2.6       | 10    | 537.3      | 53.7         |           |            | 42.9          | 96.6        |
| H2 I   | AOR |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 J   | LAB | 29.0      | 10    | 228.6      | 22.9         |           |            | 16.9          | 39.8        |
| H2 K   | IRC |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 L   | RAD | 322.6     | 10    | 1,118.4    | 111.8        |           |            | 148.4         | 260.2       |
| H2 M   | CAT | 0.0       | 6.5   | 28.2       | 4.3          |           |            | 105.2         | 109.5       |
| H2 N   | RAT |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 O   | NUC | 0.0       | 10    | 0.0        | 0.0          |           |            | 0.0           | 0.0         |
| H2 P   | RDL |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 Q   | HYP |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 R   | DTY | 0.0       | 10    | 0.0        | 0.0          |           |            | 26.9          | 26.9        |
| H2 S   | LL  | 0.0       | 10    | 0.0        | 0.0          |           |            | 0.0           | 0.0         |
| H2 T   | MGT | 0.0       | 10    | 253.6      | 25.4         |           |            | 14.8          | 40.2        |
| H2 U   | EDP | 31.7      | 5     | 1,094.9    | 219.0        |           |            | 0.9           | 219.9       |
| H2 V   | MRI | 0.0       | 6     | 0.0        | 0.0          |           |            | 0.0           | 0.0         |
| H2 W   | LIT |           | 5     |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 X   | ETH |           | 10    |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 Y   | TRP |           | 5     |            | 0.0          |           |            | 0.0           | 0.0         |
| H2 Z   | TMT |           | 5     |            | 0.0          |           |            | 0.0           | 0.0         |
| TOTAL  |     | 385.86    |       | 3,260.94   | 437.1        | 0.0       | 0.0        | 356.0         | 793.1       |

DISTRIBUTION OF CAPITAL FACILITIES ALLOWANCE

INSTITUTION NAME Atlantic General Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

| ALLOWANCE |                                    | Col. 1        | Col. 2  | Col. 3  | Col. 4  | Col. 5      | Col. 6     | Col. 7  | Col. 8  |
|-----------|------------------------------------|---------------|---------|---------|---------|-------------|------------|---------|---------|
| SOURCE    |                                    | General       | Dietary | Laundry | Comm.   | DataProcess | Department | Total   |         |
| A         | TOTAL INTEREST                     | HOSP. RECORDS | 87.7    | /////// | /////// | ///////     | ///////    | /////// | /////// |
| B         | TOTAL DEPRECIATION & LEASE/RENTALS | HOSP. RECORDS | 1,120.6 | /////// | /////// | ///////     | ///////    | /////// | /////// |
| C         | CAP INTENSIVE EQUIP DEPR           | H2 TOTAL      | 793.1   | 26.9    |         | 40.2        | 219.9      | 506.2   | 793.1   |
| D         | BLDG & GEN EQUIP DEPR              | B-C           | 327.5   | /////// | /////// | ///////     | ///////    | /////// | 327.5   |
| E         | BLDG & GEN EQUIP DEPR & INT        | A+D           | 415.2   | 26.9    |         | 40.2        | 219.9      | 506.2   | 1,120.6 |
| F         | STANDARD UNITS                     |               | 18,415  | 5,820   | 50,597  | 8,558       | 8,558      | /////// | /////// |
| G         | ALLOWANCE PER UNIT                 |               | 0.0225  | 0.0046  |         | 0.0047      | 0.0257     | /////// | /////// |

| DISTRIBUTION | CODE                           | Adj. Square Feet Basis |        |       |      |      |      |       |       |         |
|--------------|--------------------------------|------------------------|--------|-------|------|------|------|-------|-------|---------|
| H1           | Medical Surgical Acute         | MSG                    | 3,515  | 79.3  | 20.9 |      | 3.0  | 16.6  | 119.8 |         |
| H2           | Pediatric Acute                | PED                    |        |       |      |      |      |       |       |         |
| H3           | Psychiatric Acute              | PSY                    |        |       |      |      |      |       |       |         |
| H4           | Obstetric Acute                | OBS                    |        |       |      |      |      |       |       |         |
| H5           | Definitive Observation         | DEF                    |        |       |      |      |      |       |       |         |
| H6           | Medical Surgical ICU           | MIS                    |        |       |      |      |      |       |       |         |
| H7           | Coronary Care                  | CCU                    |        |       |      |      |      |       |       |         |
| H8           | Pediatric ICU                  | PIC                    |        |       |      |      |      |       |       |         |
| H9           | Neo Natal ICU                  | NEO                    |        |       |      |      |      |       |       |         |
| H10          | Burn Care                      | BUR                    |        |       |      |      |      |       |       |         |
| H11          | Psychiatric ICU                | PSI                    |        |       |      |      |      |       |       |         |
| H12          | Shock Trauma                   | TRM                    |        |       |      |      |      |       |       |         |
| H13          | Oncology                       | ONC                    |        |       |      |      |      |       |       |         |
| H14          | New Born Nursery               | NUR                    |        |       |      |      |      |       |       |         |
| H15          | Premature Nursery              | PRE                    |        |       |      |      |      |       |       |         |
| H16          | Rehabilitation                 | RHB                    |        |       |      |      |      |       |       |         |
| H17          | Intermediate Care              | ICC                    |        |       |      |      |      |       |       |         |
| H18          | Emergency Services             | EMG                    | 1,630  | 36.8  |      | 10.2 | 56.0 |       | 102.9 |         |
| H19          | Clinic Services                | CL                     | 4,704  | 106.1 |      | 8.9  | 48.6 |       | 163.5 |         |
| H20          | Observation                    | OBV                    | 1,507  | 34.0  | 6.0  | 1.2  | 6.5  |       | 47.7  |         |
| H21          | Psychiatric Day & Night Care   | PDC                    |        |       |      |      |      |       |       |         |
| H22          | Free Standing Emergency Serv   | FSE                    |        |       |      |      |      |       |       |         |
| H23          | Same Day Surgery               | SDS                    | 172    | 3.9   |      | 0.7  | 3.9  |       | 8.5   |         |
| H24          | MRI Scanner                    | MRI                    | 171    | 3.9   |      | 0.0  | 0.1  |       | 4.0   |         |
| H25          | Labor and Delivery             | DEL                    |        |       |      |      |      |       |       |         |
| H26          | Operating Room                 | OR                     |        |       |      | 0.9  | 5.1  | 96.6  | 102.7 |         |
| H27          | Operating Room Clinic          | ORC                    | 96     | 2.2   |      | 0.2  | 1.0  |       | 3.3   |         |
| H28          | Ambulatory Surgery             | AOR                    |        |       |      |      |      |       |       |         |
| H29          | Anesthesiology                 | ANS                    | 920    | 20.7  |      | 1.5  | 8.1  |       | 30.4  |         |
| H30          | Medical Supplies               | MSS                    |        |       |      | 0.1  | 0.4  |       | 0.5   |         |
| H31          | Drugs                          | CDS                    |        |       |      | 1.0  | 5.3  |       | 6.3   |         |
| H32          | Laboratory                     | LAB                    | 925    | 20.9  |      | 5.8  | 31.5 | 39.8  | 97.9  |         |
| H33          | Blood (NOT IN USE)             | BB                     |        |       |      |      |      |       |       |         |
| H34          | Electrocardiography            | EKG                    | 44     | 1.0   |      | 0.2  | 1.4  |       | 2.6   |         |
| H35          | Interventional Cardiovascular  | IRC                    |        |       |      |      |      |       |       |         |
| H36          | Radiology-Diagnostic           | RAD                    | 1,644  | 37.1  |      | 3.1  | 17.0 | 260.2 | 317.4 |         |
| H37          | CT Scanner                     | CAT                    | 288    | 6.5   |      | 0.7  | 3.9  | 109.5 | 120.7 |         |
| H38          | Radiology-Therapeutic          | RAT                    |        |       |      |      |      |       |       |         |
| H39          | Nuclear Medicine               | NUC                    |        |       |      |      |      |       |       |         |
| H40          | Respiratory Therapy            | RES                    | 144    | 3.2   |      | 0.9  | 4.9  |       | 9.0   |         |
| H41          | Pulmonary Function Testing     | PUL                    |        |       |      |      |      |       |       |         |
| H42          | Electroencephalography         | EEG                    | 44     | 1.0   |      |      |      |       | 1.0   |         |
| H43          | Physical Therapy               | PTH                    | 1,371  | 30.9  |      | 1.4  | 7.9  |       | 40.3  |         |
| H44          | Occupational Therapy           | OTH                    | 160    | 3.6   |      | 0.2  | 1.0  |       | 4.8   |         |
| H45          | Speech Therapy                 | STH                    | 80     | 1.8   |      | 0.1  | 0.6  |       | 2.5   |         |
| H46          | Recreational Therapy           | REC                    |        |       |      |      |      |       |       |         |
| H47          | Audiology                      | AUD                    |        |       |      |      |      |       |       |         |
| H48          | Other Physical Medicine        | OPM                    |        |       |      |      |      |       |       |         |
| H49          | Renal Dialysis                 | RDL                    |        |       |      |      |      |       |       |         |
| H50          | Organ Acquisition              | OA                     |        |       |      |      |      |       |       |         |
| H51          | Leukopheresis                  | LEU                    |        |       |      |      |      |       |       |         |
| H52          | Hyperbaric Chamber             | HYP                    |        |       |      |      |      |       |       |         |
| H53          | Lithotripsy                    | LIT                    |        |       |      |      |      |       |       |         |
| H54          | Transurethral Micro Therm      | TMT                    |        |       |      |      |      |       |       |         |
| H55          | Oncology Clinic                | OCL                    |        |       |      |      |      |       |       |         |
| I            | Transurethral NdI/Ablation     | TNA                    |        |       |      |      |      |       |       |         |
| H56          | Subtotal                       | ABC                    | 17,415 | 392.6 | 26.9 |      | 40.2 | 219.9 | 506.2 | 1,185.7 |
| H57          | Research                       | REG                    |        |       |      |      |      |       |       |         |
| H58          | Nursing Education              | RNS                    |        |       |      |      |      |       |       |         |
| H59          | Other Health Prof Educ         | OHE                    |        |       |      |      |      |       |       |         |
| H60          | Comm. Health Educ              | CHE                    |        |       |      |      |      |       |       |         |
| H61          | Free Standing Clinic           | FSC                    |        |       |      |      |      |       |       |         |
| H62          | Housing                        | HOU                    |        |       |      |      |      |       |       |         |
| H63          | Ambulance                      | AMB                    |        |       |      |      |      |       |       |         |
| H64          | Parking                        | PAR                    |        |       |      |      |      |       |       |         |
| H65          | Cafeteria                      | CAF                    |        |       |      |      |      |       |       |         |
| H66          | Doctor Office Rent             | DPO                    |        |       |      |      |      |       |       |         |
| H67          | Office, Other Rent             | OOR                    |        |       |      |      |      |       |       |         |
| H68          | Retail Operations              | REO                    |        |       |      |      |      |       |       |         |
| H69          | Patient Telephones             | PTE                    |        |       |      |      |      |       |       |         |
| H70          | Day Care                       | DEB                    |        |       |      |      |      |       |       |         |
| H71          | Home Health Services           | HHC                    |        |       |      |      |      |       |       |         |
| H72          | O/P Renal Dialysis             | HHC                    |        |       |      |      |      |       |       |         |
| H73          | Skilled Nursing Care           | ECF                    |        |       |      |      |      |       |       |         |
| H74          | Laboratory Nonpatient          | ULB                    |        |       |      |      |      |       |       |         |
| H75          | Phys. Part B Services          | UPB                    | 1,000  | 22.5  |      |      |      |       | 22.5  |         |
| H76          | Cardiac Reahb Center           | CRC                    |        |       |      |      |      |       |       |         |
| H77          | Nurse Practitioner Part B Serv | NP                     |        |       |      |      |      |       |       |         |
| II           | Total Distributed              | XYZ                    | 18,415 | 415.2 | 26.9 |      | 40.2 | 219.9 | 506.2 | 1,208.3 |

Note: Except for Cafeteria, depreciation is directly costed to unregulated and auxiliary center in the base year expenses.

CAPITAL FACILITY ALLOWANCE SUMMARY

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|                       |            | COL. 1                     | COL. 2                | COL. 3  | COL. 4                       | COL. 5                | COL. 6 |   |
|-----------------------|------------|----------------------------|-----------------------|---------|------------------------------|-----------------------|--------|---|
|                       |            | FACILITY PROJECT BASE YEAR |                       |         | FACILITY PROJECT BUDGET YEAR |                       |        |   |
| CASH REQUIREMENTS     | SOURCE     | BUILDING                   | MOVEABLE<br>EQUIPMENT | TOTAL   | BUILDING                     | MOVEABLE<br>EQUIPMENT | TOTAL  |   |
| A DEBT SERVICE        | REC/BUDGET | 158.2                      | 0.0                   | 158.2   |                              |                       |        | A |
| B RENTS/LEASES        | REC/BUDGET | 0.0                        | 431.0                 | 431.0   |                              |                       |        | B |
| C PURCHASES           | REC/BUDGET | 41.5                       | 697.3                 | 738.8   |                              |                       |        | C |
| D RENOVATIONS/REPAIRS | REC/BUDGET | 0.0                        |                       |         |                              |                       |        | D |
| E CASH REQUIREMENTS   | A+B+C+D    | 199.7                      | 1,128.3               | 1,328.0 |                              |                       |        | E |

G

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

## OTHER FINANCIAL CONSIDERATIONS

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|                        | SOURCE                                       | BASE YEAR   |         |            | BUDGET YEAR |        |            |   |
|------------------------|--|-------------|---------|------------|-------------|--------|------------|---|
|                        |  | TOTAL       | DIRECT  | PERCENTAGE | TOTAL       | DIRECT | PERCENTAGE |   |
| REVENUES               |  | COL. 1      | COL. 2  | COL. 3     | COL. 4      | COL. 5 | COL. 6     |   |
| A                      | DONATIONS, PLEDGES                           | SCH. GR     | (54.9)  |            | (54.9)      |        |            | A |
| B                      | GRANTS                                       | SCH. GR     | 0.0     |            | 0.0         |        |            | B |
| C                      | INVESTMENT INCOME (INT., DIVIDENDS)          | SCH. GR     | (8.7)   |            | (8.7)       |        |            | C |
| D                      | DONATED COMMODITIES                          | SCH. GR     |         |            |             |        |            | D |
| E                      | PSRO   | SCH. GR     |         |            |             |        |            | E |
| F                      | OTHER  | SCH. GR     | (182.9) |            | (182.9)     |        |            | F |
| G                      | TOTAL REVENUES                               | A+B+C+D+E+F | (246.5) |            | (246.5)     |        |            | G |
| EXPENSES               |  |             |         |            |             |        |            |   |
| H                      | LICENSES AND TAXES                           | SCH. UA     | 0.0     |            | 0.0         |        |            | H |
| I                      | SHORT TERM INTEREST                          | SCH. UA     | 0.0     |            | 0.0         |        |            | I |
| J                      | OTHER  | REC/BUDGET  |         |            | 0.0         |        |            | J |
| K                      | TOTAL EXPENSES                               | H+I+J       | 0.0     |            | 0.0         |        |            | K |
| OTHER ADJUSTMENTS      |  |             |         |            |             |        |            |   |
| L                      | AUX. ENT & OIP GAINS                         | SCH. E, F   |         |            | 0.0         |        |            | L |
| M                      | AUX. ENT & OIP LOSSES (other than cafeteria) | SCH. E, F   | 0.0     |            | 0.0         |        |            | M |
| N                      | EXCESS CASE REQUIRE.- BLDG & EQUIP           | SCH. H4     | 0.0     |            | 0.0         |        |            | N |
| O                      | GAIN ON DISPOSAL OF ASSETS                   | REC/BUDGET  |         |            |             |        |            | O |
| P                      | LOSS ON DISPOSAL OF ASSETS                   | REC/BUDGET  |         |            | 0.0         |        |            | P |
| Q                      | TOTAL OTHER ADJUSTMENTS                      | L+M+N+O+P   | 0.0     |            | 0.0         |        |            | Q |
| PERCENTAGE CALCULATION |  |             |         |            |             |        |            |   |
| R                      | NET OTHER FINANCIAL CONSIDERATIONS           | G+K+Q       | (246.5) |            | (246.5)     |        |            | R |
| S                      | OTHER FINANCIAL CONSIDERATION PERCENTAGE     | R/SCH. M    |         |            | (0.01560)   |        |            | S |

THIRD PARTY PAYOR DIFFERENTIAL

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|                           |   | SOURCE           | COL.1     | COL.2      | COL.3    |
|---------------------------|---|------------------|-----------|------------|----------|
| CHARGES, DEDUCTIBLES, CBA |   |                  | INPATIENT | OUTPATIENT | TOTAL    |
| A                         | GROSS PATIENT REVENUE, HSCRC REGULATED                      | SCH RE, LINE E   | 2,702.3   | 14,445.0   | 17,147.3 |
| B                         | MEDICARE REVENUE, HSCRC REGULATED                           | RECORDS/BUDGET   | 1,890.4   | 5,593.6    | 7,484.0  |
| C                         | MEDICAID REVENUE, HSCRC REGULATED                           | RECORDS/BUDGET   | 49.5      | 185.4      | 234.9    |
| D                         | BLUE CROSS REVENUE, HSCRC REGULATED                         | RECORDS/BUDGET   | 120.9     | 1,459.0    | 1,579.9  |
| E                         | MCO SUBCONTRACTED MEDICARE, MEDICAID, HSCRC REGULATED**     | RECORDS/BUDGET   | 439.9     | 4,452.5    | 4,892.4  |
| F                         | MEDICARE DEDUCTIBLES PAID BY MEDICAID & BC, HSCRC REGULATED | RECORDS/BUDGET   | ////      | ////       | 376.2    |
| G                         | UNCOMPENSATED CARE, HSCRC REGULATED ***                     | RECORDS/BUDGET   | 117.9     | 872.8      | 990.7    |
| G1                        | OTHER PAYORS  | A-B-C-D-E-G      | 83.7      | 1,881.7    | 1,965.4  |
| RATIOS, LEVEL III COSTS   |   |                  |           |            |          |
| H                         | RATIO OF MEDICARE & MEDICAID CHARGES                        | COL.3 (B+C)/A    | ////      | ////       | 0.4502   |
| I                         | RATIO OF BLUE CROSS INPATIENT CHARGES                       | COL.1 D/COL 3 A  | 0.0071    | ////       | ////     |
| I1                        | RATIO OF BLUE CROSS OUTPATIENT CHARGES                      | COL.2 D/COL 3 A  | ////      | 0.0851     | ////     |
| J                         | RATIO OF MCO MEDICARE, MEDICAID                             | COL.3 E/COL 3 A  | ////      | ////       | 0.2853   |
| K                         | RATIO OF DEDUCTIBLES PAID BY MEDICAID & BLUE CROSS          | COL.3 F/COL 3 A  | ////      | ////       | 0.0219   |
| L                         | RATIO OF UNCOMPENSATED CARE                                 | COL.3 G/COL 3 A  | ////      | ////       | 0.0578   |
| M                         | RATIO OF OTHER PAYORS CHARGES                               | COL.3 G1/COL 3 A | ////      | ////       | 0.1146   |
| N                         | LEVEL III COSTS   | SCHEDULE MA      | ////      | ////       | 15,555.4 |
| DIFFERENTIAL CALCULATION  |   |                  |           |            |          |
| O                         | GROSS REVENUE, HSCRC REGULATED                              | *                | ////      | ////       | 17,409.4 |
| P                         | PAYOR DIFFERENTIAL  | 1-(COL3, O/N)    | ////      | ////       | 0.1192   |

\*O=O (.06H + .0225I + .02I1 + .06J + .02K + L + .02M) + N  
 Medicare B/C In B/C Out MCO's Deducts UC Others  
 & Medicaid

\*\* ATTACH DETAIL BY PLAN

\*\*\* RECONCILE TO AUDITED FINANCIALS

**INSTITUTION NAME** Edward McCready Memorial Hospital  
**INSTITUTION NUMBER** 0045  
**SUPPLEMENT TO SCHEDULE PDA**

**FISCAL YEAR** 6/30/18  
**BUDGET YEAR** 6/30/18

**LINE E, Medicare & Medicaid HMO Revenue Detail**

INPATIENT                      OUTPATIENT      TOTAL (\$000)

|                         |                |                  |                  |
|-------------------------|----------------|------------------|------------------|
| Priority Partners       | \$168.0        | \$2,091.3        | \$2,259.3        |
| UHC Community Plan      | 0.0            | 154.1            | 154.1            |
| Maryland Physician Care | 21.3           | 401.0            | 422.3            |
| Amerigroup              | 49.1           | 240.8            | 289.9            |
| Beacon Health           | 0.0            | 968.6            | 968.6            |
| Other                   | 201.5          | 596.7            | 798.2            |
|                         | <u>\$439.9</u> | <u>\$4,452.5</u> | <u>\$4,892.4</u> |

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045  
SUPPLEMENT TO SCHEDULE PDA

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

**LINE G**

**UNCOMPENSATED CARE, HSCRC REGULATED \*\*\***

Audited Financial Statements

|   |                |                  |
|---|----------------|------------------|
| Bad Debts                                   |                | \$732.1          |
| Charity Care                                |                | 326.0            |
| Uncompensated care fund receipts            |                | 420.4            |
|   |                | <u>\$1,478.5</u> |
|   |                |                  |
| Trial Balance                               |                |                  |
| Bad debt write-offs - regulated             |                | 342.4            |
| Charity write-offs - regulated              |                | 290.8            |
| Unregulated bad debt and charity write-offs |                | 67.3             |
| Change in balance sheet reserve:            |                |                  |
| Balance 6/30/2017                           | (\$556.6)      |                  |
| Balance 6/30/2018                           | (\$946.3)      |                  |
|   | <u>\$389.7</u> | 389.7            |
| Bad debt recoveries - regulated             |                | (117.8)          |
| Bad debt recoveries - unregulated           |                | (5.8)            |
| Uncompensated care fund receipts            |                | 420.4            |
| Miscellaneous difference                    |                | 91.4             |
|   |                | <u>\$1,478.5</u> |
|   |                |                  |
| Annual Report                               |                |                  |
| Uncompensated Care - Schedule PDA           |                | \$990.7          |
| Unregulated bad debts                       |                | 32.1             |
| Unregulated charity care                    |                | 35.2             |
| Uncompensated care fund receipts            |                | 420.4            |
|   |                | <u>\$1,478.5</u> |



INSTITUTION NAME Edward McCreehy Memorial Hospital  
 INSTITUTION NUMBER 0045

REVENUE CENTER RATE SUMMARY

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

M

|                                   | Units of Measure | Direct Expenses | Patient Care Overhead Expense | Other Overhead Expenses | N/A     | Physician Support Expenses | Resident Intern Expenses | CFA      |                       |              |          |
|-----------------------------------|------------------|-----------------|-------------------------------|-------------------------|---------|----------------------------|--------------------------|----------|-----------------------|--------------|----------|
|                                   |                  |                 |                               |                         |         |                            |                          | Level I  | Bldg. & Gen Equipment | Departmental | Level II |
|                                   | Col. 1           | Col. 2          | Col. 3                        | Col. 4                  | Col. 5  | Col. 6                     | Col. 7                   | Col. 8   | Col. 9                | Col. 10      | Col. 11  |
| A1 Medical Surgical Acute         | MSG              | 786             | 646.0                         | 325.7                   | 219.5   | ////////                   |                          | 1,191.1  | 98.9                  | 20.9         | 1,310.9  |
| A2 Pediatric Acute                | PED              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A3 Psychiatric Acute              | PSY              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A4 Obstetric Acute                | OBS              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A5 Definitive Observation         | DEF              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A6 Medical Surgical ICU           | MIS              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A7 Coronary Care                  | CCU              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A8 Pediatric ICU                  | PIC              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A9 Neo Natal ICU                  | NEO              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A10 Burn Care                     | BUR              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A11 Psychiatric ICU               | PSI              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A12 Shock Trauma                  | TRM              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A13 Oncology                      | ONC              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A14 New Born Nursery              | NUR              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A15 Clinic Services Primary       | CLP              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A16 Premature Nursery             | PRE              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A17 Rehabilitation                | RHB              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A18 Intermediate Care             | ICC              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A19 Emergency Services            | EMG              | 44,678          | 2,178.4                       | 137.0                   | 724.8   | ////////                   |                          | 3,040.3  | 102.9                 |              | 3,143.2  |
| A20 Clinic Services               | CL               | 47,407          | 1,890.2                       | 383.3                   | 633.9   | ////////                   |                          | 2,907.4  | 163.5                 |              | 3,070.9  |
| A21 Observation                   | OBV              | 4,799           | 254.2                         | 138.0                   | 86.7    | ////////                   |                          | 479.0    | 41.7                  | 6.0          | 526.7    |
| A22 Oncology Clinic               | OCL              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A23 Psychiatric Day & Night Care  | PDC              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A24 Same Day Surgery              | SDS              | 384             | 151.8                         | 13.9                    | 50.8    | ////////                   |                          | 216.5    | 8.5                   |              | 225.0    |
| A25 Lithotripsy                   | LIT              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A26 Free Standing Emergency       | FSE              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A27 Labor and Delivery            | DEL              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A28 Operating Room                | OR               | 16,941          | 199.3                         | 6.5                     | 100.8   | ////////                   |                          | 306.6    | 6.1                   | 96.6         | 409.3    |
| A29 Operating Room Clinic         | ORC              | 1,268           | 37.7                          | 7.9                     | 20.3    | ////////                   |                          | 65.9     | 3.3                   |              | 69.2     |
| A30 Med/Surg Extraordinary        | MSE              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A31 Anesthesiology                | ANS              | 21,419          | 316.3                         | 74.8                    | 162.7   | ////////                   |                          | 553.8    | 30.4                  |              | 584.2    |
| A32 Laboratory                    | LAB              | 653,229         | 1,225.5                       | 91.4                    | 624.6   | ////////                   |                          | 1,941.6  | 58.1                  | 39.8         | 2,039.4  |
| A33 Blood                         | BB               |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A34 Electrocardiography           | EKG              | 32,542          | 52.9                          | 3.6                     | 27.1    | ////////                   |                          | 83.6     | 2.6                   |              | 86.2     |
| A35 Electroencephalography        | EEG              |                 |                               | 3.5                     | 0.1     | ////////                   |                          | 3.6      | 1.0                   |              | 4.6      |
| A36 Radiology-Diagnostic          | RAD              | 55,082          | 661.6                         | 142.9                   | 349.9   | ////////                   |                          | 1,154.4  | 57.2                  | 260.2        | 1,471.8  |
| A37 Radiology-Therapeutic         | RAT              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A38 Nuclear Medicine              | NUC              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A39 CT Scanner                    | CAT              | 70,540          | 153.1                         | 25.6                    | 78.3    | ////////                   |                          | 257.0    | 11.1                  | 109.5        | 377.6    |
| A40 Interventional Cardiovascular | IRC              | 224             |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A41 Respiratory Therapy           | RES              | 96,812          | 190.4                         | 13.9                    | 82.7    | ////////                   |                          | 287.1    | 9.0                   |              | 296.1    |
| A42 Pulmonary Function Testing    | PUL              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A43 Renal Dialysis                | RDL              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A44 Physical Therapy              | PTH              | 51,703          | 308.5                         | 115.1                   | 163.7   | ////////                   |                          | 587.3    | 40.3                  |              | 627.6    |
| A45 Occupational Therapy          | OTH              | 7,360           | 39.3                          | 12.9                    | 19.6    | ////////                   |                          | 71.7     | 4.8                   |              | 76.5     |
| A46 Speech Therapy                | STH              | 2,021           | 24.5                          | 6.7                     | 12.8    | ////////                   |                          | 43.9     | 2.5                   |              | 46.5     |
| A47 Organ Acquisition             | OA               |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A48 Ambulatory Surgery            | AOR              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A49 Leukopheresis                 | LEU              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A50 Hyperbaric Chamber            | HYP              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A51 Audiology                     | AUD              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A52 Other Physical Medicine       | OPM              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A53 MRI Scanner                   | MRI              | 176             | 4.0                           | 13.8                    | 1.6     | ////////                   |                          | 19.3     | 4.0                   |              | 23.3     |
| A54 Transurethral Micro Therm     | TMT              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A55 Transurethral NdI/Ablation    | TNA              |                 |                               |                         |         | ////////                   |                          |          |                       |              |          |
| A56 Admissions Services           | ADM              | 226             |                               | 27.7                    | 0.4     | ////////                   | ////////                 | 28.1     |                       |              | 28.1     |
| A57 Medical Surgical Supplies     | MSS              | 1,434           | 344.3                         | 16.8                    | 7.8     | ////////                   | ////////                 | 368.9    | 0.5                   |              | 369.4    |
| A58 Drugs                         | CDS              | 1,434           | 646.8                         | 207.7                   | 95.9    | ////////                   | ////////                 | 950.3    | 6.3                   |              | 956.7    |
| A59 Ambulance                     | AMR              | 6,003           | 56.3                          | 1.3                     | 1.0     | ////////                   | ////////                 | 58.6     |                       |              | 58.6     |
|                                   |                  |                 |                               |                         |         |                            |                          |          |                       |              |          |
|                                   |                  |                 |                               |                         |         |                            |                          |          |                       |              |          |
|                                   |                  |                 |                               |                         |         |                            |                          |          |                       |              |          |
|                                   |                  |                 |                               |                         |         |                            |                          |          |                       |              |          |
|                                   |                  |                 |                               |                         |         |                            |                          |          |                       |              |          |
| B Totals                          |                  | 1,116,468.2     | 9,381.0                       | 1,770.2                 | 3,464.9 |                            |                          | 14,616.1 | 652.7                 | 533.1        | 15,801.9 |

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

REVENUE CENTER RATE SUMMARY

FISCAL YEAR MA 6/30/18  
 BUDGET YEAR 6/30/18

|     |                               |     | Direct | OFC Percentage | Level III | Payor Differential | Level IV | Cross Subsidy | Misc. Adj. | HSCRC Adj. | Adjusted Level IV | Average Rates |
|-----|-------------------------------|-----|--------|----------------|-----------|--------------------|----------|---------------|------------|------------|-------------------|---------------|
|     |                               |     | Col. 1 | Col. 2         | Col. 3    | Col. 4             | Col. 5   | Col. 6        | Col. 7     | Col. 8     | Col. 9            | Col. 10       |
| A1  | Medical Surgical Acute        | MSG |        | (20.4)         | 1,290.5   | 153.8              | 1,444.3  |               |            |            | 1,444.3           | 1,837.52      |
| A2  | Pediatric Acute               | PED |        |                |           |                    |          |               |            |            |                   |               |
| A3  | Psychiatric Acute             | PSY |        |                |           |                    |          |               |            |            |                   |               |
| A4  | Obstetric Acute               | OBS |        |                |           |                    |          |               |            |            |                   |               |
| A5  | Definitive Observation        | DEF |        |                |           |                    |          |               |            |            |                   |               |
| A6  | Medical Surgical ICU          | MIS |        |                |           |                    |          |               |            |            |                   |               |
| A7  | Coronary Care                 | CCU |        |                |           |                    |          |               |            |            |                   |               |
| A8  | Pediatric ICU                 | PIC |        |                |           |                    |          |               |            |            |                   |               |
| A9  | Neo Natal ICU                 | NEO |        |                |           |                    |          |               |            |            |                   |               |
| A10 | Burn Care                     | BUR |        |                |           |                    |          |               |            |            |                   |               |
| A11 | Psychiatric ICU               | PSI |        |                |           |                    |          |               |            |            |                   |               |
| A12 | Shock Trauma                  | TRM |        |                |           |                    |          |               |            |            |                   |               |
| A13 | Oncology                      | ONC |        |                |           |                    |          |               |            |            |                   |               |
| A14 | New Born Nursery              | NUR |        |                |           |                    |          |               |            |            |                   |               |
| A15 | Clinic Services Primary       | CLP |        |                |           |                    |          |               |            |            |                   |               |
| A16 | Premature Nursery             | PRE |        |                |           |                    |          |               |            |            |                   |               |
| A17 | Rehabilitation                | RHB |        |                |           |                    |          |               |            |            |                   |               |
| A18 | Intermediate Care             | ICC |        |                |           |                    |          |               |            |            |                   |               |
| A19 | Emergency Services            | EMG |        | (49.0)         | 3,094.2   | 368.8              | 3,463.0  |               |            |            | 3,463.0           | 77.51         |
| A20 | Clinic Services               | CL  |        | (47.9)         | 3,023.0   | 360.3              | 3,383.3  |               |            |            | 3,383.3           | 71.37         |
| A21 | Observation                   | OBV |        | (8.2)          | 518.5     | 61.8               | 580.3    |               |            |            | 580.3             | 120.91        |
| A22 | Oncology Clinic               | OCL |        |                |           |                    |          |               |            |            |                   |               |
| A23 | Psychiatric Day & Night Care  | PDC |        |                |           |                    |          |               |            |            |                   |               |
| A24 | Same Day Surgery              | SDS |        | (3.5)          | 221.5     | 26.4               | 247.9    |               |            |            | 247.9             | 645.56        |
| A25 | Lithotripsy                   | LIT |        |                |           |                    |          |               |            |            |                   |               |
| A26 | Free Standing Emergency       | FSE |        |                |           |                    |          |               |            |            |                   |               |
| A27 | Labor and Delivery            | DEL |        |                |           |                    |          |               |            |            |                   |               |
| A28 | Operating Room                | OR  |        | (6.4)          | 402.9     | 48.0               | 450.9    |               |            |            | 450.9             | 26.62         |
| A29 | Operating Room Clinic         | ORC |        | (1.1)          | 68.1      | 8.1                | 76.3     |               |            |            | 76.3              | 60.15         |
| A30 | Med/Surg Extraordinary        | MSE |        |                |           |                    |          |               |            |            |                   |               |
| A31 | Anesthesiology                | ANS |        | (9.1)          | 575.1     | 68.5               | 643.6    |               |            |            | 643.6             | 30.05         |
| A32 | Laboratory Services           | LAB |        | (31.8)         | 2,007.6   | 239.3              | 2,246.9  |               |            |            | 2,246.9           | 3.44          |
| A33 | Blood                         | BB  |        |                |           |                    |          |               |            |            |                   |               |
| A34 | Electrocardiography           | EKG |        | (1.3)          | 84.9      | 10.1               | 95.0     |               |            |            | 95.0              | 2.92          |
| A35 | Electroencephalography        | EEG |        | (0.1)          | 4.5       | 0.5                | 5.1      |               |            |            | 5.1               |               |
| A36 | Radiology-Diagnostic          | RAD |        | (23.0)         | 1,448.8   | 172.7              | 1,621.5  |               |            |            | 1,621.5           | 29.44         |
| A37 | Radiology-Therapeutic         | RAT |        |                |           |                    |          |               |            |            |                   |               |
| A38 | Nuclear Medicine              | NUC |        |                |           |                    |          |               |            |            |                   |               |
| A39 | CT Scanner                    | CAT |        | (5.9)          | 371.7     | 44.3               | 416.0    |               |            |            | 416.0             | 5.90          |
| A40 | Interventional Cardiovascular | IRC |        |                |           |                    |          |               |            |            |                   |               |
| A41 | Respiratory Therapy           | RES |        | (4.6)          | 291.5     | 34.7               | 326.2    |               |            |            | 326.2             | 3.37          |
| A42 | Pulmonary Function Testing    | PUL |        |                |           |                    |          |               |            |            |                   |               |
| A43 | Renal Dialysis                | RDL |        |                |           |                    |          |               |            |            |                   |               |
| A44 | Physical Therapy              | PTH |        | (9.8)          | 617.8     | 73.6               | 691.5    |               |            |            | 691.5             | 13.37         |
| A45 | Occupational Therapy          | OTH |        | (1.2)          | 75.3      | 9.0                | 84.3     |               |            |            | 84.3              | 11.46         |
| A46 | Speech Therapy                | STH |        | (0.7)          | 45.8      | 5.5                | 51.2     |               |            |            | 51.2              | 25.35         |
| A47 | Organ Acquisition             | OA  |        |                |           |                    |          |               |            |            |                   |               |
| A48 | Ambulatory Surgery            | AOR |        |                |           |                    |          |               |            |            |                   |               |
| A49 | Leukopheresis                 | LEU |        |                |           |                    |          |               |            |            |                   |               |
| A50 | Hyperbaric Chamber            | HYP |        |                |           |                    |          |               |            |            |                   |               |
| A51 | Audiology                     | AUD |        |                |           |                    |          |               |            |            |                   |               |
| A52 | Other Physical Medicine       | OPH |        |                |           |                    |          |               |            |            |                   |               |
| A53 | MRI Scanner                   | MRI |        | (0.4)          | 23.0      | 2.7                | 25.7     |               |            |            | 25.7              | 145.98        |
| A54 | Transurethral Micro Therm     | TMT |        |                |           |                    |          |               |            |            |                   |               |
| A55 | Transurethral NdI/Ablation    | TNA |        |                |           |                    |          |               |            |            |                   |               |
| A56 | Admissions Services           | ADM |        | (0.4)          | 27.7      | 3.3                | 31.0     |               |            |            | 31.0              | 137.02        |
| A57 | Medical Surgical Supplies     | MSS |        | (5.8)          | 363.6     | 43.3               | 407.0    |               |            |            | 407.0             | 283.78        |
| A58 | Drugs                         | CDS |        | (14.9)         | 941.7     | 112.2              | 1,054.0  |               |            |            | 1,054.0           | 734.94        |
| A59 | Ambulance                     | AMR |        | (0.9)          | 57.7      | 6.9                | 64.5     |               |            |            | 64.5              | 10.75         |
| B   | Totals                        |     |        | (246.5)        | 15,555.4  | 1,854.0            | 17,409.4 |               |            |            | 17,409.4          | ////////      |

OVERHEAD EXPENSE SUMMARY

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

|   | EXPENSES                    | TOTAL   | DISTRIBUTE TO:                         |                                |  |   |
|---|-----------------------------|---------|--|--------------------------------|--|---|
|   |                             |         | PHYSICIAN<br>PART B CENTERS<br>SCH. P2 | DATA<br>PROCESSING<br>SCH. DP1 | GENERAL<br>SERV CENTERS<br>SCH. C1-C14 |   |
|   | COL.1                       | COL. 2  | COL. 3                                 | COL. 4                         |  |   |
| A | DIETARY SERVICES            | 27.6    |  |                                | 27.6                                   | A |
| B | LAUNDRY AND LINEN           | 29.2    |  |                                | 29.2                                   | B |
| C | SOCIAL SERVICES             | 19.6    |  |                                | 19.6                                   | C |
| D | PURCHASING & STORES         | 42.6    |  |                                | 42.6                                   | D |
| E | PLANT OPERATIONS            | 1,019.1 |  |                                | 1,019.1                                | E |
| F | HOUSEKEEPING                | 341.0   |  |                                | 341.0                                  | F |
| G | CENTRAL SERVICES & SUPPLIES | 16.2    |  |                                | 16.2                                   | G |
| H | PHARMACY                    | 200.1   |  |                                | 200.1                                  | H |
| I | GENERAL ACCOUNTING          | 239.3   |  |                                | 239.3                                  | I |
| J | PATIENT ACCOUNTS            | 1,104.5 |  |                                | 1,104.5                                | J |
| K | HOSPITAL ADMINISTRATION     | 1,219.5 |  |                                | 1,219.5                                | K |
| L | MEDICAL RECORDS             | 270.8   |  |                                | 270.8                                  | L |
| M | MEDICAL STAFF ADMINISTRATOR | 2.6     |  |                                | 2.6                                    | M |
| N | NURSING ADMINISTRATION      | 284.7   |  |                                | 284.7                                  | N |
| O | DATA PROCESSING             | 512.0   |  | 512.0                          |  | O |
| P | TOTALS                      | 5,328.8 |  | 512.0                          | 4,816.7                                | P |

**UNREGULATED SERVICES  
FSC**

UR1

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YR UNITS | BUDGET YR UNITS |
|---|-------------|---------------|-----------------|
| A | VISITS      |               |                 |

FREE STANDING CLINIC SERVICES - 6970

Note: Provided offsite from hospital. 3970

|        | COL. 1                                    | COL. 2            | COL. 3                       | COL. 4                           |
|--------|---|-------------------|------------------------------|----------------------------------|
| SOURCE | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |

BASE YEAR DATA

|                         |                              |         |     |     |     |         |    |
|-------------------------|------------------------------|---------|-----|-----|-----|---------|----|
| B                       | BASE YEAR EXPENSES           | RECORDS |     |     |     | XXX     | B  |
| C                       | ALLOC FROM CAFE, PARK, ETC.  | SCH OAC |     | XXX |     | XXX     | C  |
| D                       | ALLOC FROM GEN SERV CENTERS  | ////    | XXX | XXX | XXX | XXX     | D  |
|                         | COL. 5                       | COL. 6  | XXX | XXX | XXX | XXX     |    |
|                         | COST CENTER                  | CODE    |     |     |     | XXX     |    |
| D1                      | Data Processing              | EDP     | DP1 |     |     | XXX     | D1 |
| D2                      |                              |         |     |     |     | XXX     | D2 |
| D3                      |                              |         |     |     |     | XXX     | D3 |
| D4                      |                              |         |     |     |     | XXX     | D4 |
| D5                      |                              |         |     |     |     | XXX     | D5 |
| D6                      |                              |         |     |     |     | XXX     | D6 |
| E                       | CAPITAL FACILITIES ALLOWANCE | H3      |     |     |     | XXX     | E  |
| F                       | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E |     |     |     | #DIV/0! | F  |
| BASE YEAR PROFIT (LOSS) |                              |         |     |     |     |         |    |
| G                       | BASE YEAR REVENUE            | RECORDS | XXX | XXX |     | XXX     | G  |
| H                       | PROFIT (LOSS)                | G-F     | XXX | XXX |     | XXX     | H  |

BUDGET YEAR DATA

|                         |                           |         |     |     |  |     |   |
|-------------------------|---------------------------|---------|-----|-----|--|-----|---|
| I                       | INFLATION                 | HSCRC   |     |     |  | XXX | I |
| J                       | MISC. ADJUSTMENTS         | BUDGET  |     |     |  | XXX | J |
| K                       | BUDGET YEAR EXPENSES      | F+I+J   |     |     |  |     | K |
| BUDGET YR PROFIT (LOSS) |                           |         |     |     |  |     |   |
| L                       | BASE YEAR REVENUE         | RECORDS | XXX | XXX |  | XXX | L |
| M                       | ADJUSTMENTS               | BUDGET  | XXX | XXX |  | XXX | M |
| N                       | BUDGET YEAR REVENUE       | L+M     | XXX | XXX |  | XXX | N |
| O                       | PROFIT (LOSS)             | N-K     | XXX | XXX |  | XXX | O |
| FTE DATA                |                           |         |     |     |  |     |   |
| P                       | BASE YR HRS WORKED/2080   | RECORDS |     |     |  |     | P |
| Q                       | BUDGET YR HRS WORKED/2080 | BUDGET  |     |     |  |     | Q |

**UNREGULATED SERVICES  
HHC**

UR2

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YR UNITS | BUDGET YR UNITS |
|---|-------------|---------------|-----------------|
| A | VISITS      |               |                 |

HOME HEALTH SERVICES - 6980  
3980

|        | COL. 1                                    | COL. 2            | COL. 3                       | COL. 4                           |
|--------|---|-------------------|------------------------------|----------------------------------|
| SOURCE | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |

**BASE YEAR DATA**

|                                |                              |         |     |     |     |         |    |
|--------------------------------|------------------------------|---------|-----|-----|-----|---------|----|
| B                              | BASE YEAR EXPENSES           | RECORDS |     |     |     | XXX     | B  |
| C                              | ALLOC FROM CAFE, PARK, ETC.  | SCH OAC |     | XXX |     | XXX     | C  |
| D                              | ALLOC FROM GEN SERV CENTERS  | ////    | XXX | XXX | XXX | XXX     | D  |
|                                | COL. 5                       | COL. 6  | XXX | XXX | XXX | XXX     |    |
|                                | COST CENTER                  | CODE    |     |     |     | XXX     |    |
| D1                             |                              |         |     |     |     | XXX     | D1 |
| D2                             |                              |         |     |     |     | XXX     | D2 |
| D3                             |                              |         |     |     |     | XXX     | D3 |
| D4                             |                              |         |     |     |     | XXX     | D4 |
| D5                             |                              |         |     |     |     | XXX     | D5 |
| D6                             |                              |         |     |     |     | XXX     | D6 |
| E                              | CAPITAL FACILITIES ALLOWANCE | H3      |     |     |     | XXX     | E  |
| F                              | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E |     |     |     | #DIV/0! | F  |
| <b>BASE YEAR PROFIT (LOSS)</b> |                              |         |     |     |     |         |    |
| G                              | BASE YEAR REVENUE            | RECORDS | XXX | XXX |     | XXX     | G  |
| H                              | PROFIT (LOSS)                | G-F     | XXX | XXX |     | XXX     | H  |

**BUDGET YEAR DATA**

|                                |                           |         |     |     |  |     |   |
|--------------------------------|---------------------------|---------|-----|-----|--|-----|---|
| I                              | INFLATION                 | HSCRC   |     |     |  | XXX | I |
| J                              | MISC. ADJUSTMENTS         | BUDGET  |     |     |  | XXX | J |
| K                              | BUDGET YEAR EXPENSES      | F+I+J   |     |     |  |     | K |
| <b>BUDGET YR PROFIT (LOSS)</b> |                           |         |     |     |  |     |   |
| L                              | BASE YEAR REVENUE         | RECORDS | XXX | XXX |  | XXX | L |
| M                              | ADJUSTMENTS               | BUDGET  | XXX | XXX |  | XXX | M |
| N                              | BUDGET YEAR REVENUE       | L+M     | XXX | XXX |  | XXX | N |
| O                              | PROFIT (LOSS)             | N-K     | XXX | XXX |  | XXX | O |
| <b>FTE DATA</b>                |                           |         |     |     |  |     |   |
| P                              | BASE YR HRS WORKED/2080   | RECORDS |     |     |  |     | P |
| Q                              | BUDGET YR HRS WORKED/2080 | BUDGET  |     |     |  |     | Q |

**UNREGULATED SERVICES  
ORD**

UR3

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|              |               |                 |
|--------------|---------------|-----------------|
| VOLUME DATA  | BASE YR UNITS | BUDGET YR UNITS |
| A TREATMENTS |               |                 |

OUTPATIENT RENAL DIALYSIS - 7720

4720

|        | COL. 1                                    | COL. 2            | COL. 3                       | COL. 4                           |
|--------|---|-------------------|------------------------------|----------------------------------|
| SOURCE | WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES<br>REVENUE | EXPENSES,<br>REVENUE<br>PER UNIT |

BASE YEAR DATA

|                         |                              |         |     |     |     |         |    |
|-------------------------|------------------------------|---------|-----|-----|-----|---------|----|
| B                       | BASE YEAR EXPENSES           | RECORDS |     |     |     | XXX     | B  |
| C                       | ALLOC FROM CAFE, PARK, ETC.  | SCH OAC |     | XXX |     | XXX     | C  |
| D                       | ALLOC FROM GEN SERV CENTERS  | ////    | XXX | XXX | XXX | XXX     | D  |
|                         | COL. 5                       | COL. 6  | XXX | XXX | XXX | XXX     |    |
|                         | COST CENTER                  | CODE    |     |     |     | XXX     |    |
| D1                      |                              |         |     |     |     | XXX     | D1 |
| D2                      |                              |         |     |     |     | XXX     | D2 |
| D3                      |                              |         |     |     |     | XXX     | D3 |
| D4                      |                              |         |     |     |     | XXX     | D4 |
| D5                      |                              |         |     |     |     | XXX     | D5 |
| D6                      |                              |         |     |     |     | XXX     | D6 |
| E                       | CAPITAL FACILITIES ALLOWANCE | H3      |     |     |     | XXX     | E  |
| F                       | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E |     |     |     | #DIV/0! | F  |
| BASE YEAR PROFIT (LOSS) |                              |         |     |     |     |         |    |
| G                       | BASE YEAR REVENUE            | RECORDS | XXX | XXX |     | XXX     | G  |
| H                       | PROFIT (LOSS)                | G-F     | XXX | XXX |     | XXX     | H  |

BUDGET YEAR DATA

|                         |                           |         |     |     |  |     |   |
|-------------------------|---------------------------|---------|-----|-----|--|-----|---|
| I                       | INFLATION                 | HSCRC   |     |     |  | XXX | I |
| J                       | MISC. ADJUSTMENTS         | BUDGET  |     |     |  | XXX | J |
| K                       | BUDGET YEAR EXPENSES      | F+I+J   |     |     |  |     | K |
| BUDGET YR PROFIT (LOSS) |                           |         |     |     |  |     |   |
| L                       | BASE YEAR REVENUE         | RECORDS | XXX | XXX |  | XXX | L |
| M                       | ADJUSTMENTS               | BUDGET  | XXX | XXX |  | XXX | M |
| N                       | BUDGET YEAR REVENUE       | L+M     | XXX | XXX |  | XXX | N |
| O                       | PROFIT (LOSS)             | N-K     | XXX | XXX |  | XXX | O |
| FTE DATA                |                           |         |     |     |  |     |   |
| P                       | BASE YR HRS WORKED/2080   | RECORDS |     |     |  |     | P |
| Q                       | BUDGET YR HRS WORKED/2080 | BUDGET  |     |     |  |     | Q |

**UNREGULATED SERVICES  
ECF**

UR4

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

| VOLUME DATA    | BASE YR UNITS | BUDGET YR UNITS |
|----------------|---------------|-----------------|
| A PATIENT DAYS |               |                 |

SKILLED NURSING CARE - 6610 / 3610

| SOURCE | COL. 1<br>WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | COL. 2<br>OTHER<br>EXPENSES | COL. 3<br>TOTAL<br>EXPENSES<br>REVENUE | COL. 4<br>EXPENSES,<br>REVENUE<br>PER UNIT |
|--------|---|-----------------------------|--|--|
|--------|---|-----------------------------|--|--|

BASE YEAR DATA

|    |                              |         |     |     |     |         |    |
|----|------------------------------|---------|-----|-----|-----|---------|----|
| B  | BASE YEAR EXPENSES           | RECORDS |     |     |     | XXX     | B  |
| C  | ALLOC FROM CAFE, PARK, ETC.  | SCH OAC |     | XXX |     | XXX     | C  |
| D  | ALLOC FROM GEN SERV CENTERS  | ////    | XXX | XXX | XXX | XXX     | D  |
|    | COL. 5                       | COL. 6  | XXX | XXX | XXX | XXX     |    |
|    | COST CENTER                  | CODE    |     |     |     | XXX     |    |
| D1 | Data Processing              | EDP     | DP1 |     |     | XXX     | D1 |
| D2 |                              |         |     |     |     | XXX     | D2 |
| D3 |                              |         |     |     |     | XXX     | D3 |
| D4 |                              |         |     |     |     | XXX     | D4 |
| D5 |                              |         |     |     |     | XXX     | D5 |
| D6 |                              |         |     |     |     | XXX     | D6 |
| D7 |                              |         |     |     |     | XXX     | D7 |
| D8 |                              |         |     |     |     | XXX     | D8 |
| D9 |                              |         |     |     |     | XXX     | D9 |
| E  | CAPITAL FACILITIES ALLOWANCE | H3      |     |     |     | XXX     | E  |
| F  | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E |     |     |     | #DIV/0! | F  |

BASE YEAR PROFIT (LOSS)

|   |                   |         |     |     |       |     |   |
|---|-------------------|---------|-----|-----|-------|-----|---|
| G | BASE YEAR REVENUE | RECORDS | XXX | XXX | 376.9 | XXX | G |
| H | PROFIT (LOSS)     | G-F     | XXX | XXX | 376.9 | XXX | H |

BUDGET YEAR DATA

|   |                      |        |  |  |  |     |   |
|---|----------------------|--------|--|--|--|-----|---|
| I | INFLATION            | HSCRC  |  |  |  | XXX | I |
| J | MISC. ADJUSTMENTS    | BUDGET |  |  |  | XXX | J |
| K | BUDGET YEAR EXPENSES | F+I+J  |  |  |  |     | K |

BUDGET YR PROFIT (LOSS)

|   |                     |         |     |     |  |     |   |
|---|---------------------|---------|-----|-----|--|-----|---|
| L | BASE YEAR REVENUE   | RECORDS | XXX | XXX |  | XXX | L |
| M | ADJUSTMENTS         | BUDGET  | XXX | XXX |  | XXX | M |
| N | BUDGET YEAR REVENUE | L+M     | XXX | XXX |  | XXX | N |
| O | PROFIT (LOSS)       | N-K     | XXX | XXX |  | XXX | O |

FTE DATA

|   |                           |         |  |  |  |  |   |
|---|---------------------------|---------|--|--|--|--|---|
| P | BASE YR HRS WORKED/2080   | RECORDS |  |  |  |  | P |
| Q | BUDGET YR HRS WORKED/2080 | BUDGET  |  |  |  |  | Q |

**UNREGULATED SERVICES  
ULB**

UR5

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YR UNITS | BUDGET YR UNITS |
|---|-------------|---------------|-----------------|
| A | RVUs        | 15,374        | 15,374          |

LABORATORY - NON-PATIENT -7220

|        | COL. 1                            | COL. 2         | COL. 3                 | COL. 4                     |
|--------|-----------------------------------|----------------|------------------------|----------------------------|
| SOURCE | WAGES, SALARIES & FRINGE BENEFITS | OTHER EXPENSES | TOTAL EXPENSES REVENUE | EXPENSES, REVENUE PER UNIT |

BASE YEAR DATA

|                         |                              |         |      |      |        |         |     |
|-------------------------|------------------------------|---------|------|------|--------|---------|-----|
| B                       | BASE YEAR EXPENSES           | RECORDS | 32.1 | 71.9 | 104.0  | XXX     | B   |
| C                       | ALLOC FROM CAFE, PARK, ETC.  | SCH OAC |      | XXX  |        | XXX     | C   |
| D                       | ALLOC FROM GEN SERV CENTERS  | ////    | XXX  | XXX  | XXX    | XXX     | D   |
|                         | COL. 5                       | COL. 6  | XXX  | XXX  | XXX    | XXX     |     |
|                         | COST CENTER                  | CODE    |      |      |        | XXX     |     |
| D1                      | Data Processing              | EDP     | DP1  | 1.8  | 2.2    | 4.0     | XXX |
| D2                      |                              |         |      |      |        |         | XXX |
| D3                      |                              |         |      |      |        |         | XXX |
| D4                      |                              |         |      |      |        |         | XXX |
| D5                      |                              |         |      |      |        |         | XXX |
| D6                      |                              |         |      |      |        |         | XXX |
| E                       | CAPITAL FACILITIES ALLOWANCE | H3      |      |      |        | XXX     | E   |
| F                       | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E | 33.9 | 74.1 | 107.9  | 0.00702 | F   |
| BASE YEAR PROFIT (LOSS) |                              |         |      |      |        |         |     |
| G                       | BASE YEAR REVENUE            | RECORDS | XXX  | XXX  | 8.5    | XXX     | G   |
| H                       | PROFIT (LOSS)                | G-F     | XXX  | XXX  | (99.4) | XXX     | H   |

BUDGET YEAR DATA

|                         |                           |         |     |     |  |     |   |
|-------------------------|---------------------------|---------|-----|-----|--|-----|---|
| I                       | INFLATION                 | HSCRC   |     |     |  | XXX | I |
| J                       | MISC. ADJUSTMENTS         | BUDGET  |     |     |  | XXX | J |
| K                       | BUDGET YEAR EXPENSES      | F+I+J   |     |     |  |     | K |
| BUDGET YR PROFIT (LOSS) |                           |         |     |     |  |     |   |
| L                       | BASE YEAR REVENUE         | RECORDS | XXX | XXX |  | XXX | L |
| M                       | ADJUSTMENTS               | BUDGET  | XXX | XXX |  | XXX | M |
| N                       | BUDGET YEAR REVENUE       | L+M     | XXX | XXX |  | XXX | N |
| O                       | PROFIT (LOSS)             | N-K     | XXX | XXX |  | XXX | O |
| FTE DATA                |                           |         |     |     |  |     |   |
| P                       | BASE YR HRS WORKED/2080   | RECORDS |     |     |  |     | P |
| Q                       | BUDGET YR HRS WORKED/2080 | BUDGET  |     |     |  |     | Q |



**UNREGULATED SERVICES  
UPB**

UR6

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

| VOLUME DATA |       | BASE YR UNITS | BUDGET YR UNITS |
|-------------|-------|---------------|-----------------|
| A           | FTE's | 5.1           | 5.1             |

PHYSICIANS PART B SERVICES

| SOURCE | COL. 1                            | COL. 2         | COL. 3                 | COL. 4                     |
|--------|-----------------------------------|----------------|------------------------|----------------------------|
|        | WAGES, SALARIES & FRINGE BENEFITS | OTHER EXPENSES | TOTAL EXPENSES REVENUE | EXPENSES, REVENUE PER UNIT |

BASE YEAR DATA

|                         |                              |         |       |       |         |           |     |
|-------------------------|------------------------------|---------|-------|-------|---------|-----------|-----|
| B                       | BASE YEAR EXPENSES           | RECORDS | 565.6 | 449.0 | 1,014.6 | XXX       | B   |
| C                       | ALLOC FROM CAFE, PARK, ETC.  | SCH OAC |       | XXX   |         | XXX       | C   |
| D                       | ALLOC FROM GEN SERV CENTERS  | ////    | XXX   | XXX   | XXX     | XXX       | D   |
|                         | COL. 5                       | COL. 6  | XXX   | XXX   | XXX     | XXX       |     |
|                         | COST CENTER                  | CODE    |       |       |         | XXX       |     |
| D1                      | Data Processing              | EDP     | DP1   | 8.7   | 10.6    | 19.3      | XXX |
| D2                      |                              |         |       |       |         | XXX       | D2  |
| D3                      |                              |         |       |       |         | XXX       | D3  |
| D4                      |                              |         |       |       |         | XXX       | D4  |
| D5                      |                              |         |       |       |         | XXX       | D5  |
| D6                      |                              |         |       |       |         | XXX       | D6  |
| E                       | CAPITAL FACILITIES ALLOWANCE | H3      |       | 22.5  | 22.5    | XXX       | E   |
| F                       | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E | 574.3 | 482.1 | 1,056.4 | 207.13290 | F   |
| BASE YEAR PROFIT (LOSS) |                              |         |       |       |         |           |     |
| G                       | BASE YEAR REVENUE            | RECORDS | XXX   | XXX   | 1,712.8 | XXX       | G   |
| H                       | PROFIT (LOSS)                | G-F     | XXX   | XXX   | 656.4   | XXX       | H   |

BUDGET YEAR DATA

|                         |                           |         |     |     |     |     |   |
|-------------------------|---------------------------|---------|-----|-----|-----|-----|---|
| I                       | INFLATION                 | HSCRC   |     |     |     | XXX | I |
| J                       | MISC. ADJUSTMENTS         | BUDGET  |     |     |     | XXX | J |
| K                       | BUDGET YEAR EXPENSES      | F+I+J   |     |     |     |     | K |
| BUDGET YR PROFIT (LOSS) |                           |         |     |     |     |     |   |
| L                       | BASE YEAR REVENUE         | RECORDS | XXX | XXX |     | XXX | L |
| M                       | ADJUSTMENTS               | BUDGET  | XXX | XXX |     | XXX | M |
| N                       | BUDGET YEAR REVENUE       | L+M     | XXX | XXX |     | XXX | N |
| O                       | PROFIT (LOSS)             | N-K     | XXX | XXX |     | XXX | O |
| FTE DATA                |                           |         |     |     |     |     |   |
| P                       | BASE YR HRS WORKED/2080   | RECORDS | 5.1 |     | 5.1 |     | P |
| Q                       | BUDGET YR HRS WORKED/2080 | BUDGET  |     |     |     |     | Q |

**UNREGULATED SERVICES  
CNA**

UR7

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YR UNITS | BUDGET YR UNITS |
|---|-------------|---------------|-----------------|
| A | CNA MINUTES |               |                 |

CERTIFIED NURSE ANESTHETIST

|        | COL. 1                            | COL. 2         | COL. 3                 | COL. 4                     |
|--------|-----------------------------------|----------------|------------------------|----------------------------|
| SOURCE | WAGES, SALARIES & FRINGE BENEFITS | OTHER EXPENSES | TOTAL EXPENSES REVENUE | EXPENSES, REVENUE PER UNIT |

BASE YEAR DATA

|                         |                              |         |     |     |     |         |    |
|-------------------------|------------------------------|---------|-----|-----|-----|---------|----|
| B                       | BASE YEAR EXPENSES           | RECORDS |     |     |     | XXX     | B  |
| C                       | ALLOC FROM CAFE, PARK, ETC.  | SCH OAC |     | XXX |     | XXX     | C  |
| D                       | ALLOC FROM GEN SERV CENTERS  | ////    | XXX | XXX | XXX | XXX     | D  |
|                         | COL. 5                       | COL. 6  | XXX | XXX | XXX | XXX     |    |
|                         | COST CENTER                  | CODE    |     |     |     | XXX     |    |
| D1                      |                              |         |     |     |     | XXX     | D1 |
| D2                      |                              |         |     |     |     | XXX     | D2 |
| D3                      |                              |         |     |     |     | XXX     | D3 |
| D4                      |                              |         |     |     |     | XXX     | D4 |
| D5                      |                              |         |     |     |     | XXX     | D5 |
| D6                      |                              |         |     |     |     | XXX     | D6 |
| E                       | CAPITAL FACILITIES ALLOWANCE | H3      |     |     |     | XXX     | E  |
| F                       | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E |     |     |     | #DIV/0! | F  |
| BASE YEAR PROFIT (LOSS) |                              |         |     |     |     |         |    |
| G                       | BASE YEAR REVENUE            | RECORDS | XXX | XXX |     | XXX     | G  |
| H                       | PROFIT (LOSS)                | G-F     | XXX | XXX |     | XXX     | H  |

BUDGET YEAR DATA

|                         |                           |         |     |     |  |     |   |
|-------------------------|---------------------------|---------|-----|-----|--|-----|---|
| I                       | INFLATION                 | HSCRC   |     |     |  | XXX | I |
| J                       | MISC. ADJUSTMENTS         | BUDGET  |     |     |  | XXX | J |
| K                       | BUDGET YEAR EXPENSES      | F+I+J   |     |     |  |     | K |
| BUDGET YR PROFIT (LOSS) |                           |         |     |     |  |     |   |
| L                       | BASE YEAR REVENUE         | RECORDS | XXX | XXX |  | XXX | L |
| M                       | ADJUSTMENTS               | BUDGET  | XXX | XXX |  | XXX | M |
| N                       | BUDGET YEAR REVENUE       | L+M     | XXX | XXX |  | XXX | N |
| O                       | PROFIT (LOSS)             | N-K     | XXX | XXX |  | XXX | O |
| FTE DATA                |                           |         |     |     |  |     |   |
| P                       | BASE YR HRS WORKED/2080   | RECORDS |     |     |  |     | P |
| Q                       | BUDGET YR HRS WORKED/2080 | BUDGET  |     |     |  |     | Q |

**UNREGULATED SERVICES  
PHYSICIAN SUPPORT SERVICES**

UR8

INSTITUTION NAME Edward McCready Memorial Hospital  
INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
BUDGET YEAR 6/30/18

| VOLUME DATA |      | BASE YR UNITS | BUDGET YR UNITS |
|-------------|------|---------------|-----------------|
| A           | FTEs |               |                 |

**NURSE PRACTITIONERS PART B SERVICES**

*Note: Provided offsite from hospital.*

| SOURCE | COL. 1<br>WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | COL. 2<br>OTHER<br>EXPENSES | COL. 3<br>TOTAL<br>EXPENSES<br>REVENUE | COL. 4<br>EXPENSES,<br>REVENUE<br>PER UNIT |
|--------|---|-----------------------------|--|--|
|--------|---|-----------------------------|--|--|

**BASE YEAR DATA**

|                                |                              |         |     |     |     |         |    |
|--------------------------------|------------------------------|---------|-----|-----|-----|---------|----|
| B                              | BASE YEAR EXPENSES           | RECORDS |     |     |     | XXX     | B  |
| C                              | ALLOC FROM CAFE, PARK, ETC.  | SCH OAC |     | XXX |     | XXX     | C  |
| D                              | ALLOC FROM GEN SERV CENTERS  | ////    | XXX | XXX | XXX | XXX     | D  |
|                                | COL. 5                       | COL. 6  | XXX | XXX | XXX | XXX     |    |
|                                | COST CENTER                  | CODE    |     |     |     | XXX     |    |
| D1                             | Data Processing              | EDP     | DP1 |     |     | XXX     | D1 |
| D2                             |                              |         |     |     |     | XXX     | D2 |
| D3                             |                              |         |     |     |     | XXX     | D3 |
| D4                             |                              |         |     |     |     | XXX     | D4 |
| D5                             |                              |         |     |     |     | XXX     | D5 |
| D6                             |                              |         |     |     |     | XXX     | D6 |
| E                              | CAPITAL FACILITIES ALLOWANCE | H3      |     |     |     | XXX     | E  |
| F                              | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E |     |     |     | #DIV/0! | F  |
| <b>BASE YEAR PROFIT (LOSS)</b> |                              |         |     |     |     |         |    |
| G                              | BASE YEAR REVENUE            | RECORDS | XXX | XXX |     | XXX     | G  |
| H                              | PROFIT (LOSS)                | G-F     | XXX | XXX |     | XXX     | H  |

**BUDGET YEAR DATA**

|                                |                           |         |     |     |  |     |   |
|--------------------------------|---------------------------|---------|-----|-----|--|-----|---|
| I                              | INFLATION                 | HSCRC   |     |     |  | XXX | I |
| J                              | MISC. ADJUSTMENTS         | BUDGET  |     |     |  | XXX | J |
| K                              | BUDGET YEAR EXPENSES      | F+I+J   |     |     |  |     | K |
| <b>BUDGET YR PROFIT (LOSS)</b> |                           |         |     |     |  |     |   |
| L                              | BASE YEAR REVENUE         | RECORDS | XXX | XXX |  | XXX | L |
| M                              | ADJUSTMENTS               | BUDGET  | XXX | XXX |  | XXX | M |
| N                              | BUDGET YEAR REVENUE       | L+M     | XXX | XXX |  | XXX | N |
| O                              | PROFIT (LOSS)             | N-K     | XXX | XXX |  | XXX | O |
| <b>FTE DATA</b>                |                           |         |     |     |  |     |   |
| P                              | BASE YR HRS WORKED/2080   | RECORDS |     |     |  |     | P |
| Q                              | BUDGET YR HRS WORKED/2080 | BUDGET  |     |     |  |     | Q |

UNREGULATED SERVICES

UR9

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

| VOLUME DATA |      | BASE YR UNITS | BUDGET YR UNITS |
|-------------|------|---------------|-----------------|
| A           | FTEs |               |                 |

| SOURCE | COL. 1<br>WAGES, SALAR-<br>IES & FRINGE<br>BENEFITS | COL. 2<br>OTHER<br>EXPENSES | COL. 3<br>TOTAL<br>EXPENSES<br>REVENUE | COL. 4<br>EXPENSES,<br>REVENUE<br>PER UNIT |
|--------|---|-----------------------------|--|--|
|--------|---|-----------------------------|--|--|

BASE YEAR DATA

|                         |                              |         |     |     |     |         |    |
|-------------------------|------------------------------|---------|-----|-----|-----|---------|----|
| B                       | BASE YEAR EXPENSES           | RECORDS |     |     |     | XXX     | B  |
| C                       | ALLOC FROM CAFE, PARK, ETC.  | SCH OAC |     | XXX |     | XXX     | C  |
| D                       | ALLOC FROM GEN SERV CENTERS  | ////    | XXX | XXX | XXX | XXX     | D  |
|                         | COL. 5                       | COL. 6  | XXX | XXX | XXX | XXX     |    |
|                         | COST CENTER                  | CODE    |     |     |     | XXX     |    |
| D1                      |                              |         |     |     |     | XXX     | D1 |
| D2                      |                              |         |     |     |     | XXX     | D2 |
| D3                      |                              |         |     |     |     | XXX     | D3 |
| D4                      |                              |         |     |     |     | XXX     | D4 |
| D5                      |                              |         |     |     |     | XXX     | D5 |
| D6                      |                              |         |     |     |     | XXX     | D6 |
| E                       | CAPITAL FACILITIES ALLOWANCE | H3      |     |     |     | XXX     | E  |
| F                       | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E |     |     |     | #DIV/0! | F  |
| BASE YEAR PROFIT (LOSS) |                              |         |     |     |     |         |    |
| G                       | BASE YEAR REVENUE            | RECORDS | XXX | XXX |     | XXX     | G  |
| H                       | PROFIT (LOSS)                | G-F     | XXX | XXX |     | XXX     | H  |

BUDGET YEAR DATA

|                         |                           |         |     |     |  |     |   |
|-------------------------|---------------------------|---------|-----|-----|--|-----|---|
| I                       | INFLATION                 | HSCRC   |     |     |  | XXX | I |
| J                       | MISC. ADJUSTMENTS         | BUDGET  |     |     |  | XXX | J |
| K                       | BUDGET YEAR EXPENSES      | F+I+J   |     |     |  |     | K |
| BUDGET YR PROFIT (LOSS) |                           |         |     |     |  |     |   |
| L                       | BASE YEAR REVENUE         | RECORDS | XXX | XXX |  | XXX | L |
| M                       | ADJUSTMENTS               | BUDGET  | XXX | XXX |  | XXX | M |
| N                       | BUDGET YEAR REVENUE       | L+M     | XXX | XXX |  | XXX | N |
| O                       | PROFIT (LOSS)             | N-K     | XXX | XXX |  | XXX | O |
| FTE DATA                |                           |         |     |     |  |     |   |
| P                       | BASE YR HRS WORKED/2080   | RECORDS |     |     |  |     | P |
| Q                       | BUDGET YR HRS WORKED/2080 | BUDGET  |     |     |  |     | Q |

UNREGULATED SERVICES

UR10

INSTITUTION NAME Edward McCready Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18  
 BUDGET YEAR 6/30/18

|   | VOLUME DATA | BASE YR UNITS | BUDGET YR UNITS |
|---|-------------|---------------|-----------------|
| A | Visits      |               |                 |

|        | COL. 1                            | COL. 2         | COL. 3                 | COL. 4                     |
|--------|-----------------------------------|----------------|------------------------|----------------------------|
| SOURCE | WAGES, SALARIES & FRINGE BENEFITS | OTHER EXPENSES | TOTAL EXPENSES REVENUE | EXPENSES, REVENUE PER UNIT |

BASE YEAR DATA

|                         |                              |         |     |     |     |         |    |
|-------------------------|------------------------------|---------|-----|-----|-----|---------|----|
| B                       | BASE YEAR EXPENSES           | RECORDS |     |     |     | XXX     | B  |
| C                       | ALLOC FROM CAFE, PARK, ETC.  | SCH OAC |     | XXX |     | XXX     | C  |
| D                       | ALLOC FROM GEN SERV CENTERS  | ////    | XXX | XXX | XXX | XXX     | D  |
|                         | COL. 5                       | COL. 6  | XXX | XXX | XXX | XXX     |    |
|                         | COST CENTER                  | CODE    |     |     |     | XXX     |    |
| D1                      |                              |         |     |     |     | XXX     | D1 |
| D2                      |                              |         |     |     |     | XXX     | D2 |
| D3                      |                              |         |     |     |     | XXX     | D3 |
| D4                      |                              |         |     |     |     | XXX     | D4 |
| D5                      |                              |         |     |     |     | XXX     | D5 |
| D6                      |                              |         |     |     |     | XXX     | D6 |
| E                       | CAPITAL FACILITIES ALLOWANCE | H3      |     |     |     | XXX     | E  |
| F                       | BASE YEAR ADJUSTED EXPENSES  | B+C+D+E |     |     |     | #DIV/0! | F  |
| BASE YEAR PROFIT (LOSS) |                              |         |     |     |     |         |    |
| G                       | BASE YEAR REVENUE            | RECORDS | XXX | XXX |     | XXX     | G  |
| H                       | PROFIT (LOSS)                | G-F     | XXX | XXX |     | XXX     | H  |

BUDGET YEAR DATA

|                         |                           |         |     |     |  |     |   |
|-------------------------|---------------------------|---------|-----|-----|--|-----|---|
| I                       | INFLATION                 | HSCRC   |     |     |  | XXX | I |
| J                       | MISC. ADJUSTMENTS         | BUDGET  |     |     |  | XXX | J |
| K                       | BUDGET YEAR EXPENSES      | F+I+J   |     |     |  |     | K |
| BUDGET YR PROFIT (LOSS) |                           |         |     |     |  |     |   |
| L                       | BASE YEAR REVENUE         | RECORDS | XXX | XXX |  | XXX | L |
| M                       | ADJUSTMENTS               | BUDGET  | XXX | XXX |  | XXX | M |
| N                       | BUDGET YEAR REVENUE       | L+M     | XXX | XXX |  | XXX | N |
| O                       | PROFIT (LOSS)             | N-K     | XXX | XXX |  | XXX | O |
| FTE DATA                |                           |         |     |     |  |     |   |
| P                       | BASE YR HRS WORKED/2080   | RECORDS |     |     |  |     | P |
| Q                       | BUDGET YR HRS WORKED/2080 | BUDGET  |     |     |  |     | Q |

SCHEDULE UR06-A PHYSICIANS PART B SERVICES - D

INSTITUTION NAME Edward McCready Memorial Hospital

INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

| (1)  | (2)                   | (3)  | (4)               | (5)               | (6)     | (7)               | (8)  |
|------|-----------------------|--|-------------------|-------------------|---------|-------------------|------|
| Code | Physician Description | Wages,<br>Salaries &<br>Fringe<br>Benefits | Other<br>Expenses | Total<br>Expenses | Revenue | Hospital<br>Based | FTEs |
| 05   | Anesthesiologists     |  | 0.0               | 0.0               | 68.6    | Yes               |      |
| 06   | Cardiology            | 8.0  | 4.3               | 12.3              | 5.7     |                   | 0.5  |
| 30   | Diagnostic Radiology  |  | 271.0             | 271.0             | 168.8   | Yes               |      |
| 70   | Clinic                |  | 0.0               | 0.0               | 1,050.7 |                   |      |
| 93   | Emergency Medicine    | 566.3                                      | 206.8             | 773.1             | 419.0   |                   | 4.6  |
|      |                       | 574.3                                      | 482.1             | 1,056.4           | 1,712.8 |                   |      |

## ANNUAL COST SURVEY

INSTITUTION NAME Edward McCready Memorial Hospital

FISCAL YEAR 6/30/18

INSTITUTION NUMBER 0045

|          |   | COL. 1   | COL. 2  |
|----------|---|----------|---------|
| CATEGORY |   | COSTS    | PERCENT |
| A        | SALARIES AND WAGES                          | 7,011.7  | 44.4%   |
| B        | FRINGE BENEFITS                             | 1,395.3  | 8.8%    |
| C        | DEPRECIATION & AMORTIZATION                 | 668.7    | 4.2%    |
| C1       | OPERATING LEASES                            | 431.0    | 2.7%    |
| D        | INTEREST EXPENSE                            | 86.1     | 0.5%    |
| E        | MEDICAL & SURGICAL SUPPLIES                 | 685.8    | 4.3%    |
| F        | IV SOLUTIONS AND PHARMACY                   | 655.9    | 4.2%    |
| G        | LAUNDRY, LINEN, UNIFORMS                    | 29.2     | 0.2%    |
| H        | FILMS & SOLUTIONS                           | 19.0     | 0.1%    |
| I        | BLOOD, PLASMANATE, ALBUMEN                  | 62.5     | 0.4%    |
| J        | CONTRACTED SERVICES                         | 605.7    | 3.8%    |
| K        | PROFESSIONAL FEES                           | 1,876.8  | 11.9%   |
| L        | AGENCY NURSES                               | 36.6     | 0.2%    |
| M        | MALPRACTICE INSURANCE                       | 141.7    | 0.9%    |
| N        | ALL OTHER INSURANCE                         | 82.9     | 0.5%    |
| O        | TELEPHONE                                   | 100.9    | 0.6%    |
| P        | UTILITIES & WATER                           | 319.9    | 2.0%    |
| Q        | FOOD  | 36.6     | 0.2%    |
| R        | PRINTING, OFFICE SUPPLIES, COPYING, POSTAGE | 135.0    | 0.9%    |
| S        | CHEMICALS, SOLUTIONS, LUBRICATION, GASES    |          |         |
| T        | OTHER (DETAIL IF OVER 20% OF SUPPLY COST)   | 1,410.1  | 8.9%    |
| U        | TOTAL                                       | 15,791.6 | 100.0%  |

| Detail of Line T, Other Expenses:       |         |
|---|---------|
| Miscellaneous                           | 531.1   |
| Seminars/Travel/Meals/Lodging           |         |
| Maintenance equipment service contracts | 698.7   |
| Dues/Subscriptions                      | 75.0    |
| Public Relations/Marketing/Advertising  | 105.3   |
|   |         |
|   | 1,410.1 |

**TRANSACTIONS WITH RELATED ENTITIES**

TRE

INSTITUTION NAME Edward McCreedy Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

| COL.1 | COL. 2         | COL. 3   | COL. 4   | COL. 5           | COL. 6                           |
|-------|----------------|--|--|------------------|----------------------------------|
| NO.   | RELATED ENTITY | VALUE OF ASSET/<br>SERVICE PROVIDED<br><b>TO</b><br>THE HOSPITAL | VALUE OF ASSET/<br>SERVICE PROVIDED<br><b>BY</b><br>THE HOSPITAL | CATEGORY<br>CODE | DESCRIPTION<br>OF<br>TRANSACTION |
|       |                | CODE ONLY AS ONE OF<br>THE FOLLOWING:<br>B, D, F, H, J           | CODE ONLY AS ONE OF<br>THE FOLLOWING:<br>A, C, E, G, I           |                  |                                  |
|       |                | \$0  | \$0  |                  |                                  |
|       |                |  |  |                  |                                  |
|       |                |  |  |                  |                                  |
|       |                |  |  |                  |                                  |
|       |                |  |  |                  |                                  |
|       |                |  |  |                  |                                  |
|       |                |  |  |                  |                                  |
|       |                |  |  |                  |                                  |
|       |                |  |  |                  |                                  |



**UNREGULATED SERVICES SUMMARY  
URS**

INSTITUTION NAME Edward McCreedy Memorial Hospital  
 INSTITUTION NUMBER 0045

FISCAL YEAR 6/30/18

| <b>SCHEDULE</b> | <b>ENTITY NAME AND ADDRESS</b>   | <b>NATURE OF SERVICE</b>       |
|-----------------|--|--------------------------------|
| UR-1            | OUTPATIENT FACILITY IN PRINCESS ANNE, MD<br>CURRENTLY NOT IN USE                 | OUTPATIENT CLINIC              |
| UR-2            | N/A  | HOME HEALTH SERVICES           |
| UR-3            | N/A  | OUTPATIENT RENAL<br>DIALYSIS   |
| UR-4            | N/A  | SKILLED NURSING CARE           |
| UR-5            | BLOOD DRAWS TAKEN AT SKILLED NURING<br>FACILITIES IN THE SURROUNDING COMMUNITIES | NON-PATIENT LAB                |
| UR-6            | Physician Professional Fee Billings<br>201 Hall Highway<br>Crisfield, MD 21817   | PART-B PHYSICIANS              |
| UR-7            |  | CERTIFIED NURSE<br>ANESTHETIST |
| UR-8            |  | PART-B NURSE<br>PRACTITIONERS  |
| UR-9            |  | RADIOLOGY<br>SERVICES          |
| UR-10           |  | URGENT CARE CENTER             |

**SUPPLEMENTAL SCHEDULE  
GROSS PATIENT REVENUE RECONCILIATION SCHEDULE  
GPRRS**

INSTITUTION NAME Edward McCreedy Memorial Hospital FISCAL YEAR 6/30/18  
INSTITUTION NUMBER 0045

Section I  
TOTAL GROSS PATIENT REVENUE

| Line # |                             | COL. 1    | Col. 2     | Col. 3   |
|--------|-----------------------------|-----------|------------|----------|
|        |                             | Inpatient | Outpatient | Total    |
| 1      | Total In-State Revenue      | 2,618.1   | 13,876.3   | 16,494.4 |
| 2      | Total Out-State Revenue     | 84.2      | 568.7      | 652.9    |
| 3      | Total Gross Patient Revenue | 2,702.3   | 14,445.0   | 17,147.3 |

Section II  
TOTAL MEDICARE/NON-FFS REVENUE

|   | COL. 1               | Col. 2                | Col. 3               | Col. 4                | Col. 5        |         |
|---|----------------------|-----------------------|----------------------|-----------------------|---------------|---------|
|   | In-State I/P Revenue | Out-State I/P Revenue | In-State O/P Revenue | Out-State O/P Revenue | Total Revenue |         |
| 4 | Medicare FFS Revenue | 1,805.8               | 67.1                 | 5,348.7               | 203.8         | 7,425.4 |
| 5 | Non-FFS Revenue      | 100.6                 | 0.0                  | 300.2                 | 64.8          | 465.6   |
| 6 | Total Revenue        | 1,906.3               | 67.1                 | 5,648.9               | 268.6         | 7,890.9 |