

**NORTHWEST HOSPITAL**

**HEALTH SERVICES COST REVIEW  
COMMISSION**

**RATE REVIEW SYSTEM**

**FOR THE FISCAL YEAR ENDED JUNE 30, 2018**

**INPATIENTS AND PATIENT DAYS**

**V1**

INSTITUTION NAME:        NORTHWEST HOSPITAL

FISCAL YEAR

06/30/2018

INSTITUTION NUMBER:    210040

| REPORTING SCHEDULE |     | CENTER                       | COL. 1     | COL. 2       | COL. 3                      | COL. 4                  | COL. 5                | COL. 6              |
|--------------------|-----|------------------------------|------------|--------------|-----------------------------|-------------------------|-----------------------|---------------------|
|                    |     |                              | ADMISSIONS | PATIENT DAYS | INTRA HOSPITAL TRANSFERS IN | LENGTH OF STAY          | AVERAGE LICENSED BEDS | % OCCUPANCY         |
|                    |     |                              | RECORDS    | RECORDS      | RECORDS                     | COL 2 / (COL 1 + COL 3) | RECORDS               | COL 2 / COL 5 * 365 |
| D01                | MSG | Med/Surg Acute               | 7,656      | 37,798       | 0                           | 4.9                     | 149                   | 0.695               |
| D02                | PED | Pediatric Acute              | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D03                | PSY | Psychiatric Acute            | 1,655      | 10,723       | 0                           | 6.5                     | 37                    | 0.794               |
| D04                | OBS | Obstetrics Acute             | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D05                | DEF | Definitive Observation       | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D06                | MIS | Med/Surg Intensive Care      | 948        | 2,070        | 0                           | 2.2                     | 16                    | 0.354               |
| D07                | CCU | Coronary Care                | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D08                | PIC | Pediatric Intensive Care     | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D09                | NEO | Neonatal Intensive Care      | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D10                | BUR | Burn Care                    | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D11                | PSI | Psychiatric Intensive Care   | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D12                | TRM | Shock Trauma                 | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D13                | ONC | Oncology                     | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D16                | ECF | Skilled Nursing Care         | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D17                | CRH | Chronic Care                 | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D52                | ADD | Adolescent Dual Diagnosed    | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D54                | RHB | Rehabilitation               | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D70                | PAD | Psychiatric Adult            | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D71                | PCD | Psychiatric Child/Adolescent | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D73                | PSG | Psychiatric Geriatric        | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| D82                | PSD | Pediatric Step-Down          | 0          | 0            | 0                           | 0.0                     | 0                     | 0.000               |
| SUBTOTAL           |     |                              | 10,259     | 50,591       | 0                           | 4.9                     | 202                   | 0.686               |
| D14                | NUR | Newborn Nursery              | 0          | 0            | 0                           | 0.0                     | 0                     |                     |
| D15                | PRE | Premature Nursery            | 0          | 0            | 0                           | 0.0                     | 0                     |                     |
| TOTAL              |     |                              | 10,259     | 50,591       | 0                           | 4.9                     | 202                   | 0.686               |

OUTPATIENT VISITS

V2

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|                    |        |                         | COL. 1           | COL. 2            | COL. 3        | COL. 4         | COL. 5          | COL. 6        |
|--------------------|--------|-------------------------|------------------|-------------------|---------------|----------------|-----------------|---------------|
| REPORTING SCHEDULE |        | CENTER                  | INPATIENT VISITS | OUTPATIENT VISITS | TOTAL VISITS  | INPATIENT RVUS | OUTPATIENT RVUS | TOTAL RVUS    |
|                    |        |                         | RECORDS          | RECORDS           | COL 1 + COL 2 | RECORDS        | RECORDS         | COL 4 + COL 5 |
| D18                | EMG    | Emergency Services      | 8,742            | 46,381            | 55,123        | 128,972        | 475,224         | 604,196       |
| D19                | CL     | Clinical Services       | 1,018            | 24,879            | 25,897        | 11,982         | 170,795         | 182,777       |
| D20                | PDC    | Psych. Day & Night Care | 0                | 0                 | 0             |                |                 |               |
| D22                | SDS    | Same Day Surgery        | 0                | 4,629             | 4,629         |                |                 |               |
| D50                | FSE    | Free Standing Emergency | 0                | 0                 | 0             |                |                 |               |
| D55                | OBV    | Observation             | 715              | 5,057             | 5,772         | 10,153         | 102,865         | 113,018       |
| D58                | OCL    | Oncology O/P Clinic     | 0                | 0                 | 0             | 0              | 0               | 0             |
| D83                | CL-340 | 340B Clinic Services    |                  |                   |               | 0              | 0               | 0             |
|                    |        |                         |                  |                   |               |                |                 |               |
|                    |        |                         |                  |                   |               |                |                 |               |
|                    | TOTAL  |                         | 10,475           | 80,946            | 91,421        | 151,107        | 748,884         | 899,991       |

**ANCILLARY SERVICE UNITS**

**V3**

INSTITUTION NAME:     NORTHWEST HOSPITAL

FISCAL YEAR     06/30/2018

INSTITUTION NUMBER:   210040

COL. 1

COL. 2

COL. 3

COL. 4

| REPORTING SCHEDULE |         | CENTER                                    | UNIT OF MEASURE    | INPATIENT VOLUME | OUTPATIENT VOLUME | TOTAL VOLUME  |
|--------------------|---------|---|--------------------|------------------|-------------------|---------------|
|                    |         |   |                    | RECORDS          | RECORDS           | COL 1 + COL 2 |
| D23                | DEL     | Labor & Delivery Services                 | MD RVUs            | 0                | 0                 | 0             |
| D24                | OR      | Operating Room                            | Minutes            | 251,978          | 479,037           | 731,015       |
| D24A               | ORC     | Operating Room Clinic                     | Minutes            | 1,284            | 135,953           | 137,237       |
| D25                | ANS     | Anesthesiology                            | Minutes            | 251,645          | 473,447           | 725,092       |
| D28                | LAB     | Laboratory Services                       | MD RVUs            | 3,864,293        | 4,370,975         | 8,235,268     |
| D30                | EKG     | Electrocardiography                       | 1974 California RV | 106,335          | 166,937           | 273,272       |
| D31                | IRC     | Interventional Radiology / Cardiovascular | MD RVUs            | 25,409           | 25,184            | 50,593        |
| D32                | RAD     | Radiology-Diagnostic                      | HSCRC RVUs         | 200,257          | 516,601           | 716,858       |
| D33                | CAT     | CT Scanner                                | HSCRC RVUs         | 283,813          | 697,814           | 981,627       |
| D34                | RAT     | Radiology-Therapeutic                     | MD RVUs            | 0                | 0                 | 0             |
| D35                | NUC     | Nuclear Medicine                          | HSCRC RVUs         | 63,352           | 54,030            | 117,382       |
| D36                | RES     | Respiratory Therapy                       | MD RVUs            | 1,507,074        | 272,804           | 1,779,878     |
| D37                | PUL     | Pulmonary Function Testing                | MD RVUs            | 3,811            | 36,234            | 40,045        |
| D38                | EEG     | Electroencephalography                    | 1974 California RV | 41,852           | 56,577            | 98,429        |
| D39                | PTH     | Physical Therapy                          | MD RVUs            | 170,072          | 109,730           | 279,802       |
| D40                | OTH     | Occupational Therapy                      | MD RVUs            | 61,842           | 16,395            | 78,237        |
| D41                | STH     | Speech Language Pathology                 | MD RVUs            | 63,744           | 11,051            | 74,795        |
| D42                | REC     | Recreational Therapy                      | Treatments         | 0                | 0                 | 0             |
| D43                | AUD     | Audiology                                 | MD RVUs            | 0                | 0                 | 0             |
| D44                | OPM     | Other Physical Medicine                   | Treatments         | 0                | 0                 | 0             |
| D45                | RDL     | Renal Dialysis                            | Treatments         | 2,099            | 0                 | 2,099         |
| D46                | OA      | Organ Acquisition                         | Treatments         | 0                | 0                 | 0             |
| D48                | LEU     | Leukopheresis                             | JHU RVUs           | 0                | 0                 | 0             |
| D49                | HYP     | Hyperbaric Chamber                        | Hours of Treatment | 8                | 984               | 992           |
| D51                | MRI     | Magnetic Resonance Imaging                | HSCRC RVUs         | 122,766          | 147,095           | 269,861       |
| D53                | LIT     | Lithotripsy                               | # of Procedures    | 0                | 0                 | 0             |
| D56                | AMR     | Ambulance Services-Rebundled              | HSCRC RVUs         | 0                | 0                 | 0             |
| D77                | PST     | Psychological Testing                     | Hours              | 0                | 0                 | 0             |
| D80                | ETH     | Electroconvulsive Therapy                 | Treatments         | 0                | 0                 | 0             |
| D84                | RAT-340 | 340B Radiology - Therapeutic              | MD RVUs            | 0                | 0                 | 0             |
| D85                | ORC-340 | 340B OR Clinic Services                   | Minutes            | 0                | 0                 | 0             |
| D86                | LAB-340 | 340B Laboratory Services                  | MD RVUs            | 0                | 0                 | 0             |
| D87                | CDS-340 | 340B Drugs                                | EIPA               | 0                | 0                 | 0             |
|                    |         |   |                    |                  |                   |               |

**EQUIVALENT INPATIENT DAYS AND ADMISSIONS**

**V5**

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018  
 INSTITUTION NUMBER: 210040

| EQUIVALENT INPATIENT DAYS (EIPDs) | SOURCE | FISCAL YEAR |
|-----------------------------------|--------|-------------|
|-----------------------------------|--------|-------------|

INPATIENT DATA - BASE YEAR

COL. 1

COL. 2

|   |   |                 |           |   |
|---|---|-----------------|-----------|---|
| A | GROSS INPATIENT REVENUE                         | RECORDS, BUDGET | 140,980.1 | A |
| B | INPATIENT GRANT REVENUE                         | RECORDS, BUDGET | 0.0       | B |
| C | TOTAL INPATIENT REVENUE *                       | A + B           | 140,980.1 | C |
| D | TOTAL INPATIENT DAYS (IPDs) (EXCLUDING NURSERY) | SCHD V 1 D      | 50,591    | D |
| E | INPATIENT UNIT REVENUE                          | C / D           | 2.78666   | E |
| F | GROSS OUTPATIENT REVENUE                        | RECORDS, BUDGET | 125,947.6 | F |
| G | OUTPATIENT GRANT REVENUE                        | RECORDS, BUDGET | 0.0       | G |
| H | TOTAL OUTPATIENT REVENUE *                      | F + G           | 125,947.6 | H |
| I | TOTAL OUTPATIENT VISITS                         | SCH V 2 B       | 86,792    | I |
| J | OUTPATIENT UNIT REVENUE                         | H / I           | 1.45114   | J |
| K | INPATIENT - OUTPATIENT UNIT REVENUE RATIO       | E / J           | 1.92032   | K |
| L | INPATIENT EQUIVALENT OF OUTPATIENT VISITS       | I / K           | 45,197    | L |
| M | EQUIVALENT INPATIENT DAYS (EIPDs)               | D + L           | 95,788    | M |

| EQUIVALENT INPATIENT ADMISSIONS (EIPAs) | SOURCE | FISCAL YEAR |
|---|--------|-------------|
|---|--------|-------------|

|   |   |           |          |   |
|---|---|-----------|----------|---|
| N | TOTAL INPATIENT ADMISSIONS                | SCH V 1 D | 10,259   | N |
| O | INPATIENT UNIT REVENUE                    | C / N     | 13.74209 | O |
| P | OUTPATIENT UNIT REVENUE                   | H / I     | 1.45114  | P |
| Q | INPATIENT - OUTPATIENT UNIT REVENUE RATIO | O / P     | 9.46986  | Q |
| R | INPATIENT EQUIVALENT OF OUTPATIENT VISITS | I / Q     | 9,165    | R |
| S | EQUIVALENT INPATIENT ADMISSIONS (EIPAs)   | N + R     | 19,424   | U |

**UNASSIGNED EXPENSES**

**UA**

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|        | COL. 1                | COL. 2          | COL. 3              | COL. 4    | COL. 5                     | COL. 6           | COL. 7           | COL. 8              | COL. 9             | COL. 10        |
|--------|-----------------------|-----------------|---------------------|-----------|----------------------------|------------------|------------------|---------------------|--------------------|----------------|
| SOURCE | MALPRACTICE INSURANCE | OTHER INSURANCE | MEDICAL CARE REVIEW | SUB-TOTAL | DEPRECIATION & AMORTIZATIO | LEASES & RENTALS | LICENSES & TAXES | INTEREST SHORT TERM | INTEREST LONG TERM | TOTAL EXPENSES |

| FISCAL YEAR DATA |   | MAL     | OIN     | MCR   | DEP     | LEA     | LIC      | IST     | ILT   |     |         |          |   |
|------------------|---|---------|---------|-------|---------|---------|----------|---------|-------|-----|---------|----------|---|
| A                | BASE YEAR EXPENSES                                | RECORDS | 4,013.8 | 680.4 | 2,405.8 | 7,100.0 | 13,839.5 | 2,345.2 | 457.4 | 0.0 | 4,245.4 | 27,987.5 | A |
| B                | ALLOC. TO AUX. ENTERPRISES & UNREGULATED SERVICES | RECORDS | 0.0     | 0.0   | 0.0     | 0.0     | (567.4)  | 0.0     | 0.0   | 0.0 | 0.0     | (567.4)  | B |
| C                | FISCAL YEAR EXP. - ADJUSTED                       | A + B   | 4,013.8 | 680.4 | 2,405.8 | 7,100.0 | 13,272.1 | 2,345.2 | 457.4 | 0.0 | 4,245.4 | 27,420.1 | C |

HOSPITAL BASED PHYSICIANS

P1 A

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018  
 INSTITUTION NUMBER: 210040

|      |                    |   | COL 1    | COL 2                  | COL 3               | COL 4                        | COL 5           | COL 6     | COL 7 |     |
|------|--------------------|---|----------|------------------------|---------------------|------------------------------|-----------------|-----------|-------|-----|
|      | <u>COST CENTER</u> | <u>CODE</u>                               | Research | Chief of Medical Staff | Medical Care Review | Administration & Supervision | Part B Services | EDUCATION | TOTAL |     |
| D13  | A1                 | Medical Staff Administration              | MSA      | 0.0                    | 249.8               | 0.0                          | 0.0             | 0.0       | 249.8 | A1  |
| D01  | A2                 | Med/Surg Acute                            | MSG      | 0.0                    | 0.0                 | 213.5                        | 63.8            | 0.0       | 277.3 | A2  |
| D02  | A3                 | Pediatric Acute                           | PED      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A3  |
| D03  | A4                 | Psychiatric Acute                         | PSY      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A4  |
| D04  | A5                 | Obstetrics Acute                          | OBS      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A5  |
| D05  | A6                 | Definitive Observation                    | DEF      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A6  |
| D06  | A7                 | Med/Surg Intensive Care                   | MIS      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A7  |
| D07  | A8                 | Coronary Care                             | CCU      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A8  |
| D08  | A9                 | Pediatric Intensive Care                  | PIC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A9  |
| D09  | A10                | Neonatal Intensive Care                   | NEO      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A10 |
| D10  | A11                | Burn Care                                 | BUR      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A11 |
| D11  | A12                | Psychiatric Intensive Care                | PSI      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A12 |
| D12  | A13                | Shock Trauma                              | TRM      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A13 |
| D13  | A14                | Oncology                                  | ONC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A14 |
| D14  | A15                | Newborn Nursery                           | NUR      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A15 |
| D15  | A16                | Premature Nursery                         | PRE      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A16 |
| D17  | A17                | Chronic Care                              | CRH      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A17 |
| D18  | A18                | Emergency Services                        | EMG      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A18 |
| D19  | A19                | Clinical Services                         | CL       | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A19 |
| D20  | A20                | Psych. Day & Night Care                   | PDC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A20 |
| D21  | A21                | Ambulatory Surgery (PBP)                  | AMS      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A21 |
| D22  | A22                | Same Day Surgery                          | SDS      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A22 |
| D23  | A23                | Labor & Delivery Services                 | DEL      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A23 |
| D24  | A24                | Operating Room                            | OR       | 0.0                    | 0.0                 | 0.0                          | 28.6            | 0.0       | 28.6  | A24 |
| D24a | A25                | Operating Room Clinic                     | ORC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A25 |
| D25  | A26                | Anesthesiology                            | ANS      | 0.0                    | 0.0                 | 0.0                          | 299.2           | 0.0       | 299.2 | A26 |
| D28  | A27                | Laboratory Services                       | LAB      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A27 |
| D30  | A28                | Electrocardiography                       | EKG      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A28 |
| D31  | A29                | Interventional Radiology / Cardiovascular | IRC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A29 |
| D32  | A30                | Radiology-Diagnostic                      | RAD      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A30 |
| D33  | A31                | CT Scanner                                | CAT      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A31 |
| D34  | A32                | Radiology-Therapeutic                     | RAT      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A32 |
| D35  | A33                | Nuclear Medicine                          | NUC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A33 |
| D36  | A34                | Respiratory Therapy                       | RES      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | A34 |

HOSPITAL BASED PHYSICIANS

P1 B

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018  
 INSTITUTION NUMBER: 210040

|          |                    |                                       | COL 1    | COL 2                  | COL 3               | COL 4                       | COL 5           | COL 6     | COL 7 |          |
|----------|--------------------|---------------------------------------|----------|------------------------|---------------------|-----------------------------|-----------------|-----------|-------|----------|
|          | <u>COST CENTER</u> | <u>CODE</u>                           | Research | Chief of Medical Staff | Medical Care Review | Adminstration & Supervision | Part B Services | EDUCATION | TOTAL |          |
| D37      | A35                | Pulmonary Function Testing            | PUL      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A35      |
| D38      | A36                | Electroencephalography                | EEG      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A36      |
| D39      | A37                | Physical Therapy                      | PTH      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A37      |
| D40      | A38                | Occupational Therapy                  | OTH      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A38      |
| D41      | A39                | Speech Language Pathology             | STH      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A39      |
| D42      | A40                | Recreational Therapy                  | REC      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A40      |
| D43      | A41                | Audiology                             | AUD      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A41      |
| D44      | A42                | Other Physical Medicine               | OPM      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A42      |
| D45      | A43                | Renal Dialysis                        | RDL      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A43      |
| D46      | A44                | Organ Acquisition                     | OA       | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A44      |
| D47      | A45                | Ambulatory Surgery                    | AOR      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A45      |
| D48      | A46                | Leukopheresis                         | LEU      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A46      |
| D49      | A47                | Hyperbaric Chamber                    | HYP      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A47      |
| D50      | A48                | Free Standing Emergency               | FSE      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A48      |
| D51      | A49                | Magnetic Resonance Imaging            | MRI      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A49      |
| D52      | A50                | Adolescent Dual Diagnosed             | ADD      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A50      |
| D53      | A51                | Lithotripsy                           | LIT      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A51      |
| D54      | A52                | Rehabilitation                        | RHB      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A52      |
| D55      | A53                | Observation                           | OBV      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A53      |
| D57      | A54                | Transurethral Microwave Thermotherapy | TMT      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A54      |
| D58      | A55                | Oncology O/P Clinic                   | OCL      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A55      |
| D59      | A56                | Transurethral Needle Ablation         | TNA      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A56      |
| D70      | A57                | Psychiatric Adult                     | PAD      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A57      |
| D71      | A58                | Psychiatric Child/Adolescent          | PCD      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A58      |
| D73      | A59                | Psychiatric Geriatric                 | PSG      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A59      |
| D74      | A60                | Individual Therapies                  | ITH      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A60      |
| D75      | A61                | Group Therapies                       | GTH      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A61      |
| D76      | A62                | Family Therapies                      | FTH      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A62      |
| D77      | A63                | Psychological Testing                 | PST      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A63      |
| D78      | A64                | Education                             | PSE      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A64      |
| D79      | A65                | Other Therapies                       | OPT      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A65      |
| D80      | A66                | Electroconvulsive Therapy             | ETH      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A66      |
| D81      | A67                | Activity Therapies                    | ATH      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A67      |
| D82      | A68                | Pediatric Step-Down                   | PSD      | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A68      |
| D83      | A69                | 340B Clinic Services                  | CL-340   | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A69      |
| D84      | A70                | 340B Radiology - Therapeutic          | RAT-340  | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A70      |
| D85      | A71                | 340B OR Clinic Services               | ORC-340  | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A71      |
| D86      | A72                | 340B Laboratory Services              | LAB-340  | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A72      |
| D87      | A73                | 340B Drugs                            | CDS-340  | 0.0                    | 0.0                 | 0.0                         | 0.0             | 0.0       | 0.0   | A73      |
| N/A 1    | A74                | Post Graduate Medical Ed              | PME      |                        |                     |                             |                 |           | 0.0   | A74      |
| <b>B</b> | <b>TOTALS</b>      | <b>////////</b>                       | 0.0      | 249.8                  | 213.5               | 391.6                       | 0.0             | 0.0       | 855.0 | <b>B</b> |



INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 2018  
 INSTITUTION NUMBER: 210040

|   |         | COL. 1              | COL. 2                | COL. 3           | COL. 4 | COL. 5   |
|---|---------|---------------------|-----------------------|------------------|--------|----------|
|   |         | FISCAL YEAR EXPENSE | ALLOC. CAFÉ PARK ETC. | DONATED SERVICES | TOTAL  | FTE DATA |
| <b>FISCAL YEAR DATA</b>                 |         |                     |                       |                  |        |          |
| MED/SURG ACUTE                          | MSG     | 43.2                | 0.0                   |                  | 43.2   | 0.2      |
| PEDIATRIC ACUTE                         | PED     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PSYCHIATRIC ACUTE                       | PSY     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| OBSTETRICS ACUTE                        | OBS     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| DEFINITIVE OBSERVATION                  | DEF     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| MED/SURG INTENSIVE CARE                 | MIS     | 105.8               | 0.1                   |                  | 105.8  | 0.5      |
| CORONARY CARE                           | CCU     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PEDIATRIC INTENSIVE CARE                | PIC     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| NEONATAL INTENSIVE CARE                 | NEO     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| BURN CARE                               | BUR     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PSYCHIATRIC INTENSIVE CARE              | PSI     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| SHOCK TRAUMA                            | TRM     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| ONCOLOGY                                | ONC     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| NEWBORN NURSERY                         | NUR     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PREMATURE NURSERY                       | PRE     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| CHRONIC CARE                            | CRH     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| EMERGENCY SERVICES                      | EMG     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| CLINICAL SERVICES                       | CL      | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PSYCH. DAY & NIGHT CARE                 | PDC     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| AMBULATORY SURGERY (PBP)                | AMS     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| SAME DAY SURGERY                        | SDS     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| LABOR & DELIVERY SERVICES               | DEL     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| OPERATING ROOM                          | OR      | 82.3                | 0.1                   |                  | 82.3   | 0.4      |
| OPERATING ROOM CLINIC                   | ORC     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| ANESTHESIOLOGY                          | ANS     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| LABORATORY SERVICES                     | LAB     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| ELECTROCARDIOGRAPHY                     | EKG     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| INTERVENTIONAL RADIOLOGY / CARDIOVASCUL | IRC     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| RADIOLOGY-DIAGNOSTIC                    | RAD     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| CT SCANNER                              | CAT     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| RADIOLOGY-THERAPEUTIC                   | RAT     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| NUCLEAR MEDICINE                        | NUC     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| RESPIRATORY THERAPY                     | RES     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PULMONARY FUNCTION TESTING              | PUL     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| ELECTROENCEPHALOGRAPHY                  | EKG     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PHYSICAL THERAPY                        | PTH     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| OCCUPATIONAL THERAPY                    | OTH     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| SPEECH LANGUAGE PATHOLOGY               | STH     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| RECREATIONAL THERAPY                    | REC     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| AUDIOLOGY                               | AUD     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| OTHER PHYSICAL MEDICINE                 | OPM     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| RENAL DIALYSIS                          | RDL     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| ORGAN ACQUISITION                       | OA      | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| AMBULATORY SURGERY                      | AOR     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| LEUKOPHERESIS                           | LEU     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| HYPERBARIC CHAMBER                      | HYP     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| FREE STANDING EMERGENCY                 | FSE     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| MAGNETIC RESONANCE IMAGING              | MRI     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| ADOLESCENT DUAL DIAGNOSED               | ADD     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| LITHOTRIPSY                             | LIT     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| REHABILITATION                          | RHB     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| OBSERVATION                             | OBV     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| TRANSURETHAL MICROWAVE THERMOTHERAPY    | TMT     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| ONCOLOGY O/P CLINIC                     | OCL     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| TRANSURETHAL NEEDLE ABLATION            | TNA     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PSYCHIATRIC ADULT                       | PAD     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PSYCHIATRIC CHILD/ADOLESCENT            | PCD     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PSYCHIATRIC GERIATRIC                   | PSG     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| INDIVIDUAL THERAPIES                    | ITH     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| GROUP THERAPIES                         | GTH     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| FAMILY THERAPIES                        | FTH     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PSYCHOLOGICAL TESTING                   | PST     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| EDUCATION                               | PSE     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| OTHER THERAPIES                         | OPT     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| ELECTROCONVULSIVE THERAPY               | ETH     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| ACTIVITY THERAPIES                      | ATH     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| PEDIATRIC STEP-DOWN                     | PSD     | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| 340B CLINIC SERVICES                    | CL-340  | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| 340B RADIOLOGY - THERAPEUTIC            | RAT-340 | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| 340B OR CLINIC SERVICES                 | ORC-340 | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| 340B LABORATORY SERVICES                | LAB-340 | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| 340B DRUGS                              | CDS-340 | 0.0                 | 0.0                   |                  | 0.0    | 0.0      |
| TOTAL                                   |         | 231.3               | 0.1                   | 0.0              | 231.4  | 1.1      |





**AUXILIARY ENTERPRISES**

**DPO**

**E03**

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018  
 INSTITUTION NUMBER: 210040

|   |             |                   |
|---|-------------|-------------------|
|   | VOLUME DATA | FISCAL YEAR UNITS |
| A | Sq Feet     | 3,000             |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**Doctor's Private Office Rent**

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

**FISCAL YEAR DATA**

| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 118.5   | 1,574.8 | 1,693.3 | XXXXX   | B   |
|-----|--|-------------|---------|---------|---------|---------|-----|
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH OA      | 0.2     | XXXXX   | 0.2     | XXXXX   | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTER   | ///////     | XXXXX   | XXXXX   | XXXXX   | XXXXX   | D   |
| /// | COL. 5 COST CENTER                       | COL. 6 CODE | /////// | XXXXX   | XXXXX   | XXXXX   | /// |
| D01 |  |             |         |         | 0.0     | XXXXX   | D01 |
| D02 |  |             |         |         | 0.0     | XXXXX   | D02 |
| D03 |  |             |         |         | 0.0     | XXXXX   | D03 |
| D04 |  |             |         |         | 0.0     | XXXXX   | D04 |
| D05 |  |             |         |         | 0.0     | XXXXX   | D05 |
| D06 |  |             |         |         | 0.0     | XXXXX   | D06 |
| D07 |  |             |         |         | 0.0     | XXXXX   | D07 |
| D08 |  |             |         |         | 0.0     | XXXXX   | D08 |
| D09 |  |             |         |         | 0.0     | XXXXX   | D09 |
| D10 |  |             |         |         | 0.0     | XXXXX   | D10 |
| D11 |  |             |         |         | 0.0     | XXXXX   | D11 |
| D12 |  |             |         |         | 0.0     | XXXXX   | D12 |
| D13 |  |             |         |         | 0.0     | XXXXX   | D13 |
| D14 |  |             |         |         | 0.0     | XXXXX   | D14 |
| E   | CAPITAL FACILITIES ALLOWANCE             | SCH H3      |         | 0.0     | 0.0     | XXXXX   | E   |
| F   | DONATED SERVICES & COMMODITIES           | RECORDS     | 0.0     | 0.0     | 0.0     | XXXXX   | F   |
| G   | FISCAL YEAR ADJUSTED EXPENSES            | B+C+D+E     | 118.7   | 1,574.8 | 1,693.5 | 0.56449 | G   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                          |         |       |       |         |       |   |
|---|--------------------------|---------|-------|-------|---------|-------|---|
| H | FISCAL YEAR REVENUE      | RECORDS | XXXXX | XXXXX | 830.0   | XXXXX | H |
| I | PROFIT (LOSS)            | G - F   | XXXXX | XXXXX | (863.5) | XXXXX | I |
| J | AMOUNT TREATED AS FRINGE | RECORDS | XXXXX | XXXXX | 0.0     | XXXXX | J |
| K | AMOUNT TREATED AS OFC    | H - I   | XXXXX | XXXXX | (863.5) | XXXXX | K |

**FTE DATA**

|   |                               |         |     |  |  |  |   |
|---|-------------------------------|---------|-----|--|--|--|---|
| S | FISCAL YEAR HOURS WORKED/2080 | RECORDS | 1.3 |  |  |  | S |
|---|-------------------------------|---------|-----|--|--|--|---|

**AUXILIARY ENTERPRISES**

OOR

E04

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|   |             |                   |
|---|-------------|-------------------|
|   | VOLUME DATA | FISCAL YEAR UNITS |
| A | Sq Feet     | 3,000             |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**Office & Other Rental**

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

**FISCAL YEAR DATA**

|     |  |             |         |       |       |         |     |
|-----|--|-------------|---------|-------|-------|---------|-----|
| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 0.0     | 312.1 | 312.1 | XXXXX   | B   |
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH OA      | 0.0     | XXXXX | 0.0   | XXXXX   | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTER   | ///////     | XXXXX   | XXXXX | XXXXX | XXXXX   | D   |
| /// | COL. 5 COST CENTER                       | COL. 6 CODE | /////// | XXXXX | XXXXX | XXXXX   | /// |
| D01 |  |             |         |       | 0.0   | XXXXX   | D01 |
| D02 |  |             |         |       | 0.0   | XXXXX   | D02 |
| D03 |  |             |         |       | 0.0   | XXXXX   | D03 |
| D04 |  |             |         |       | 0.0   | XXXXX   | D04 |
| D05 |  |             |         |       | 0.0   | XXXXX   | D05 |
| D06 |  |             |         |       | 0.0   | XXXXX   | D06 |
| D07 |  |             |         |       | 0.0   | XXXXX   | D07 |
| D08 |  |             |         |       | 0.0   | XXXXX   | D08 |
| D09 |  |             |         |       | 0.0   | XXXXX   | D09 |
| D10 |  |             |         |       | 0.0   | XXXXX   | D10 |
| D11 |  |             |         |       | 0.0   | XXXXX   | D11 |
| D12 |  |             |         |       | 0.0   | XXXXX   | D12 |
| D13 |  |             |         |       | 0.0   | XXXXX   | D13 |
| D14 |  |             |         |       | 0.0   | XXXXX   | D14 |
| E   | CAPITAL FACILITIES ALLOWANCE             | SCH H3      |         | 0.0   | 0.0   | XXXXX   | E   |
| F   | DONATED SERVICES & COMMODITIES           | RECORDS     | 0.0     | 0.0   | 0.0   | XXXXX   | F   |
| G   | FISCAL YEAR ADJUSTED EXPENSES            | B+C+D+E     | 0.0     | 312.1 | 312.1 | 0.10403 | G   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                          |         |       |       |         |       |   |
|---|--------------------------|---------|-------|-------|---------|-------|---|
| H | FISCAL YEAR REVENUE      | RECORDS | XXXXX | XXXXX | 0.0     | XXXXX | H |
| I | PROFIT (LOSS)            | G - F   | XXXXX | XXXXX | (312.1) | XXXXX | I |
| J | AMOUNT TREATED AS FRINGE | RECORDS | XXXXX | XXXXX | 0.0     | XXXXX | J |
| K | AMOUNT TREATED AS OFC    | H - I   | XXXXX | XXXXX | (312.1) | XXXXX | K |

**FTE DATA**

|   |                               |         |     |  |  |  |   |
|---|-------------------------------|---------|-----|--|--|--|---|
| S | FISCAL YEAR HOURS WORKED/2080 | RECORDS | 0.0 |  |  |  | S |
|---|-------------------------------|---------|-----|--|--|--|---|

**AUXILIARY ENTERPRISES**

**REO**

**E05**

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|   |             |                   |
|---|-------------|-------------------|
|   | VOLUME DATA | FISCAL YEAR UNITS |
| A | Sq Feet     | 3,000             |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**Retail Operations**

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

**FISCAL YEAR DATA**

|     |  |             |         |          |          |         |     |
|-----|--|-------------|---------|----------|----------|---------|-----|
| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 1,171.9 | 15,751.6 | 16,923.5 | XXXXX   | B   |
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH OA      | 2.2     | XXXXX    | 2.2      | XXXXX   | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTER   | ///////     | XXXXX   | XXXXX    | XXXXX    | XXXXX   | D   |
| /// | COL. 5 COST CENTER                       | COL. 6 CODE | /////// | XXXXX    | XXXXX    | XXXXX   | /// |
| D01 | General Accounting                       | FIS         | 82.9    | 49.9     | 132.7    | XXXXX   | D01 |
| D02 | Hospital Administration                  | MGT         | 903.2   | 52.4     | 955.6    | XXXXX   | D02 |
| D03 | Plant Operations                         | POP         | 68.4    | 88.4     | 156.8    | XXXXX   | D03 |
| D04 |  |             |         |          | 0.0      | XXXXX   | D04 |
| D05 |  |             |         |          | 0.0      | XXXXX   | D05 |
| D06 |  |             |         |          | 0.0      | XXXXX   | D06 |
| D07 |  |             |         |          | 0.0      | XXXXX   | D07 |
| D08 |  |             |         |          | 0.0      | XXXXX   | D08 |
| D09 |  |             |         |          | 0.0      | XXXXX   | D09 |
| D10 |  |             |         |          | 0.0      | XXXXX   | D10 |
| D11 |  |             |         |          | 0.0      | XXXXX   | D11 |
| D12 |  |             |         |          | 0.0      | XXXXX   | D12 |
| D13 |  |             |         |          | 0.0      | XXXXX   | D13 |
| D14 |  |             |         |          | 0.0      | XXXXX   | D14 |
| E   | CAPITAL FACILITIES ALLOWANCE             | SCH H3      |         | 0.0      | 0.0      | XXXXX   | E   |
| F   | DONATED SERVICES & COMMODITIES           | RECORDS     | 0.0     | 0.0      | 0.0      | XXXXX   | F   |
| G   | FISCAL YEAR ADJUSTED EXPENSES            | B+C+D+E     | 2,228.6 | 15,942.2 | 18,170.9 | 6.05695 | G   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                          |         |       |       |          |       |   |
|---|--------------------------|---------|-------|-------|----------|-------|---|
| H | FISCAL YEAR REVENUE      | RECORDS | XXXXX | XXXXX | 18,913.5 | XXXXX | H |
| I | PROFIT (LOSS)            | G - F   | XXXXX | XXXXX | 742.6    | XXXXX | I |
| J | AMOUNT TREATED AS FRINGE | RECORDS | XXXXX | XXXXX | 0.0      | XXXXX | J |
| K | AMOUNT TREATED AS OFC    | H - I   | XXXXX | XXXXX | 742.6    | XXXXX | K |

**FTE DATA**

|   |                               |         |      |  |  |  |   |
|---|-------------------------------|---------|------|--|--|--|---|
| S | FISCAL YEAR HOURS WORKED/2080 | RECORDS | 17.3 |  |  |  | S |
|---|-------------------------------|---------|------|--|--|--|---|

**AUXILIARY ENTERPRISES**

CAF

E07

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|   |                 |                   |
|---|-----------------|-------------------|
|   | VOLUME DATA     | FISCAL YEAR UNITS |
| A | Eq. Meals Serve | 300,432           |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**Cafeteria**

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

**FISCAL YEAR DATA**

|     |  |             |         |         |         |         |     |
|-----|--|-------------|---------|---------|---------|---------|-----|
| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 73.3    | 1,180.4 | 1,253.7 | XXXXX   | B   |
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH OA      | XXXXX   | XXXXX   | XXXXX   | XXXXX   | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTER   | ///////     | XXXXX   | XXXXX   | XXXXX   | XXXXX   | D   |
| /// | COL. 5 COST CENTER                       | COL. 6 CODE | /////// | XXXXX   | XXXXX   | XXXXX   | /// |
| D01 | General Accounting                       | FIS         | 6.1     | 3.7     | 9.8     | XXXXX   | D01 |
| D02 | Hospital Administration                  | MGT         | 66.9    | 3.9     | 70.8    | XXXXX   | D02 |
| D03 | Plant Operations                         | POP         | 98.5    | 127.1   | 225.6   | XXXXX   | D03 |
| D04 |  |             |         |         | 0.0     | XXXXX   | D04 |
| D05 |  |             |         |         | 0.0     | XXXXX   | D05 |
| D06 |  |             |         |         | 0.0     | XXXXX   | D06 |
| D07 |  |             |         |         | 0.0     | XXXXX   | D07 |
| D08 |  |             |         |         | 0.0     | XXXXX   | D08 |
| D09 |  |             |         |         | 0.0     | XXXXX   | D09 |
| D10 |  |             |         |         | 0.0     | XXXXX   | D10 |
| D11 |  |             |         |         | 0.0     | XXXXX   | D11 |
| D12 |  |             |         |         | 0.0     | XXXXX   | D12 |
| D13 |  |             |         |         | 0.0     | XXXXX   | D13 |
| D14 |  |             |         |         | 0.0     | XXXXX   | D14 |
| E   | CAPITAL FACILITIES ALLOWANCE             | SCH H3      |         | 0.0     | 0.0     | XXXXX   | E   |
| F   | DONATED SERVICES & COMMODITIES           | RECORDS     | 0.0     | 0.0     | 0.0     | XXXXX   | F   |
| G   | FISCAL YEAR ADJUSTED EXPENSES            | B+C+D+E     | 244.8   | 1,315.1 | 1,559.9 | 0.00519 | G   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                          |         |       |       |         |       |   |
|---|--------------------------|---------|-------|-------|---------|-------|---|
| H | FISCAL YEAR REVENUE      | RECORDS | XXXXX | XXXXX | 1,400.7 | XXXXX | H |
| I | PROFIT (LOSS)            | G - F   | XXXXX | XXXXX | (159.2) | XXXXX | I |
| J | AMOUNT TREATED AS FRINGE | RECORDS | XXXXX | XXXXX | (159.2) | XXXXX | J |
| K | AMOUNT TREATED AS OFC    | H - I   | XXXXX | XXXXX | (0.0)   | XXXXX | K |

**FTE DATA**

|   |                               |         |     |  |  |  |   |
|---|-------------------------------|---------|-----|--|--|--|---|
| S | FISCAL YEAR HOURS WORKED/2080 | RECORDS | 2.7 |  |  |  | S |
|---|-------------------------------|---------|-----|--|--|--|---|

**OTHER INSTITUTIONAL PROGRAMS**

REG

**F01**

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|   |                |                      |
|---|----------------|----------------------|
|   | VOLUME<br>DATA | FISCAL YEAR<br>UNITS |
| A | # of Projects  | 0                    |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**Research**

| SOURCE | WAGES, SALARIES<br>& FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES<br>REVENUE | EXPENSE<br>REVENUE<br>PER UNIT |
|--------|---|-------------------|------------------------------|--------------------------------|
|--------|---|-------------------|------------------------------|--------------------------------|

**FISCAL YEAR DATA**

|     |  |             |       |       |       |         |     |
|-----|--|-------------|-------|-------|-------|---------|-----|
| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 0.1   | 8.4   | 8.5   | XXXXX   | B   |
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH OA      | 0.1   | XXXXX | 0.1   | XXXXX   | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTER   | ////        | XXXXX | XXXXX | XXXXX | XXXXX   | D   |
| /// | COL. 5 COST CENTER                       | COL. 6 CODE | ////  | XXXXX | XXXXX | XXXXX   |     |
| D01 | General Accounting                       | FIS         | 0.0   | 0.0   | 0.1   | XXXXX   | D01 |
| D02 | Hospital Administration                  | MGT         | 0.5   | 0.0   | 0.5   | XXXXX   | D02 |
| D03 |  |             |       |       | 0.0   | XXXXX   | D03 |
| D04 |  |             |       |       | 0.0   | XXXXX   | D04 |
| D05 |  |             |       |       | 0.0   | XXXXX   | D05 |
| D06 |  |             |       |       | 0.0   | XXXXX   | D06 |
| D07 |  |             |       |       | 0.0   | XXXXX   | D07 |
| D08 |  |             |       |       | 0.0   | XXXXX   | D08 |
| D09 |  |             |       |       | 0.0   | XXXXX   | D09 |
| D10 |  |             |       |       | 0.0   | XXXXX   | D10 |
| D11 |  |             |       |       | 0.0   | XXXXX   | D11 |
| D12 |  |             |       |       | 0.0   | XXXXX   | D12 |
| D13 |  |             |       |       | 0.0   | XXXXX   | D13 |
| D14 |  |             |       |       | 0.0   | XXXXX   | D14 |
| E   | CAPITAL FACILITIES ALLOWANCE             | SCH H3      |       | 0.0   | 0.0   | XXXXX   | E   |
| F   | FISCAL YEAR ADJUSTED EXPENSES            | B+C+D       | 0.7   | 8.5   | 9.2   | 0.00000 | F   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                     |         |       |       |       |       |   |
|---|---------------------|---------|-------|-------|-------|-------|---|
| G | FISCAL YEAR REVENUE | RECORDS | XXXXX | XXXXX | 7.5   | XXXXX | G |
| H | PROFIT (LOSS)       | F - E   | XXXXX | XXXXX | (1.7) | XXXXX | H |

**FTE DATA**

|   |                               |         |     |
|---|-------------------------------|---------|-----|
| I | FISCAL YEAR HOURS WORKED/2080 | RECORDS | 0.9 |
|---|-------------------------------|---------|-----|

|   |
|---|
| I |
|---|



**OTHER INSTITUTIONAL PROGRAMS**

CHE

**F04**

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|   |                   |                      |
|---|-------------------|----------------------|
|   | VOLUME<br>DATA    | FISCAL YEAR<br>UNITS |
| A | # of Participants | 0                    |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**Community Health Education**

| SOURCE | WAGES, SALARIES<br>& FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES<br>REVENUE | EXPENSE<br>REVENUE<br>PER UNIT |
|--------|---|-------------------|------------------------------|--------------------------------|
|--------|---|-------------------|------------------------------|--------------------------------|

**FISCAL YEAR DATA**

|     |  |             |       |       |       |         |     |
|-----|--|-------------|-------|-------|-------|---------|-----|
| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 571.1 | 301.1 | 872.2 | XXXXX   | B   |
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH OA      | 0.5   | XXXX  | 0.5   | XXXXX   | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTER   | ////        | XXXXX | XXXX  | XXXXX | XXXXX   | D   |
| /// | COL. 5 COST CENTER                       | COL. 6 CODE | ////  | XXXXX | XXXX  | XXXXX   |     |
| D01 | General Accounting                       | FIS         | 4.3   | 2.6   | 6.8   | XXXXX   | D01 |
| D02 | Hospital Administration                  | MGT         | 46.5  | 2.7   | 49.3  | XXXXX   | D02 |
| D03 | Plant Operations                         | POP         | 6.3   | 8.1   | 14.4  | XXXXX   | D03 |
| D04 |  |             |       |       | 0.0   | XXXXX   | D04 |
| D05 |  |             |       |       | 0.0   | XXXXX   | D05 |
| D06 |  |             |       |       | 0.0   | XXXXX   | D06 |
| D07 |  |             |       |       | 0.0   | XXXXX   | D07 |
| D08 |  |             |       |       | 0.0   | XXXXX   | D08 |
| D09 |  |             |       |       | 0.0   | XXXXX   | D09 |
| D10 |  |             |       |       | 0.0   | XXXXX   | D10 |
| D11 |  |             |       |       | 0.0   | XXXXX   | D11 |
| D12 |  |             |       |       | 0.0   | XXXXX   | D12 |
| D13 |  |             |       |       | 0.0   | XXXXX   | D13 |
| D14 |  |             |       |       | 0.0   | XXXXX   | D14 |
| E   | CAPITAL FACILITIES ALLOWANCE             | SCH H3      |       | 0.0   | 0.0   | XXXXX   | E   |
| F   | FISCAL YEAR ADJUSTED EXPENSES            | B+C+D       | 628.7 | 314.5 | 943.2 | 0.00000 | F   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                     |         |       |       |         |       |   |
|---|---------------------|---------|-------|-------|---------|-------|---|
| G | FISCAL YEAR REVENUE | RECORDS | XXXXX | XXXXX | 427.6   | XXXXX | G |
| H | PROFIT (LOSS)       | F - E   | XXXXX | XXXXX | (515.6) | XXXXX | H |

**FTE DATA**

|   |                               |         |     |  |  |  |   |
|---|-------------------------------|---------|-----|--|--|--|---|
| I | FISCAL YEAR HOURS WORKED/2080 | RECORDS | 4.2 |  |  |  | I |
|---|-------------------------------|---------|-----|--|--|--|---|

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040  
 FISCAL YEAR: 06/30/2018

Allocation of Cafeteria / Parking Expense

|    |                                       | COL. 1            | COL. 2         |
|----|---------------------------------------|-------------------|----------------|
|    |                                       | SOURCE            | TOTAL EXPENSES |
| A  | LOSS PER FTE                          |                   |                |
| A  | GAIN (LOSS) TO BE ALLOCATED AS FRINGE | SCH. E2,E7,E8, E9 | 159.2          |
| B  | NUMBER OF FTE'S                       | RECORDS           | 1,244.8        |
| B1 | LOSS PER FTE                          | A / B             | 0.12791        |

Allocation of Data Processing

|     |                                | COL. 1  | COL. 2                      | COL. 3         | COL. 4         |
|-----|--------------------------------|---------|-----------------------------|----------------|----------------|
|     |                                | SOURCE  | WAGES, SALARIES, & BENEFITS | OTHER EXPENSES | TOTAL EXPENSES |
| C01 | FISCAL YEAR EXPENSES           | RECORDS | 3,745.7                     | 4,963.5        | 8,709.2        |
| 2   | DONATED SERVICES & COMMODITIES | RECORDS | 0.0                         | 0.0            | 0.0            |
| 3   | FISCAL YEAR ADJUSTED EXPENSES  | C1 + C2 | 3,745.7                     | 4,963.5        | 8,709.2        |

CAFETERIA, PARKING, ETC DATA PROCESSING

| /// | DISTRIBUTION OF LOSS PER FTE | LOOK UP | SCHED | CODE | COL. 1       |        | COL. 2          | COL. 3 | COL. 4                        | COL. 5         | COL. 6        | COL. 7                  | COL. 8  |
|-----|------------------------------|---------|-------|------|--------------|--------|-----------------|--------|-------------------------------|----------------|---------------|-------------------------|---------|
|     |                              |         |       |      | NO. OF FTE'S | C x D1 | FTE'S ALLOCATED | BASIS  | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |         |
| 1   | DIETARY SERVICES             | C01     | C01   | DTY  | 1.0          | \$ 0.1 | 0.0             | 0.00%  | \$ -                          | \$ -           | \$ -          | -                       | 0.1     |
| 2   | LAUNDRY & LINEN              | C02     | C02   | LL   | 0.1          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | 0.0     |
| 3   | SOCIAL SERVICES              | C03     | C03   | SSS  | 8.2          | 1.1    | 0.0             | 0.00%  | -                             | -              | -             | -                       | 1.1     |
| 4   | PURCHASING & STORES          | C04     | C04   | PUR  | 4.4          | 0.6    | 0.0             | 0.00%  | -                             | -              | -             | -                       | 0.6     |
| 5   | PLANT OPERATIONS             | C05     | C05   | POP  | 50.1         | 6.4    | 0.0             | 0.00%  | -                             | -              | -             | -                       | 6.4     |
| 6   | HOUSEKEEPING                 | C06     | C06   | HKP  | 77.0         | 9.8    | 0.0             | 0.00%  | -                             | -              | -             | -                       | 9.8     |
| 7   | CENTRAL SERVICES & SUPPLY    | C07     | C07   | CSS  | 17.3         | 2.2    | 0.0             | 0.00%  | -                             | -              | -             | -                       | 2.2     |
| 8   | PHARMACY                     | C08     | C08   | PHM  | 35.7         | 4.6    | 0.8             | 4.32%  | 161.8                         | 214.4          | -             | 376.2                   | 380.8   |
| 9   | GENERAL ACCOUNTING           | C09     | C09   | FIS  | 7.9          | 1.0    | 1.5             | 8.65%  | 324.0                         | 429.3          | -             | 753.3                   | 754.4   |
| 10  | PATIENT ACCOUNTS             | C10     | C10   | PAC  | 47.4         | 6.1    | 3.5             | 20.17% | 755.5                         | 1,001.1        | -             | 1,756.6                 | 1,762.7 |
| 11  | HOSPITAL ADMINISTRATION      | C11     | C11   | MGT  | 60.9         | 7.8    | 1.9             | 10.82% | 405.3                         | 537.1          | -             | 942.3                   | 950.1   |
| 12  | MEDICAL RECORDS              | C12     | C12   | MRD  | 12.3         | 1.6    | 1.0             | 5.99%  | 224.4                         | 297.3          | -             | 521.7                   | 523.2   |
| 13  | MEDICAL STAFF ADMINISTRATION | C13     | C13   | MSA  | 9.3          | 1.2    | 0.8             | 4.66%  | 174.5                         | 231.3          | -             | 405.8                   | 407.0   |
| 14  | NURSING ADMINISTRATION       | C14     | C14   | NAD  | 27.9         | 3.6    | 0.0             | 0.00%  | -                             | -              | -             | -                       | 3.6     |
| 15  | ORGAN ACQUISITION OVERHEAD   | C15     | C15   | OAO  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 16  | MED/SURG ACUTE               | D01     | D01   | MSG  | 227.4        | 29.1   | 2.8             | 16.06% | 601.4                         | 797.0          | -             | 1,398.4                 | 1,427.5 |
| 17  | PEDIATRIC ACUTE              | D02     | D02   | PED  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 18  | PSYCHIATRIC ACUTE            | D03     | D03   | PSY  | 70.9         | 9.1    | 0.5             | 3.10%  | 115.9                         | 153.6          | -             | 269.6                   | 278.6   |
| 19  | OBSTETRICS ACUTE             | D04     | D04   | OBS  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 20  | DEFINITIVE OBSERVATION       | D05     | D05   | DEF  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 21  | MED/SURG INTENSIVE CARE      | D06     | D06   | MIS  | 30.2         | 3.9    | 0.3             | 1.61%  | 60.4                          | 80.0           | -             | 140.4                   | 144.3   |
| 22  | CORONARY CARE                | D07     | D07   | CCU  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 23  | PEDIATRIC INTENSIVE CARE     | D08     | D08   | PIC  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 24  | NEONATAL INTENSIVE CARE      | D09     | D09   | NEO  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 25  | BURN CARE                    | D10     | D10   | BUR  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 26  | PSYCHIATRIC INTENSIVE CARE   | D11     | D11   | PSI  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 27  | SHOCK TRAUMA                 | D12     | D12   | TRM  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 28  | ONCOLOGY                     | D13     | D13   | ONC  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |
| 29  | NEWBORN NURSERY              | D14     | D14   | NUR  | 0.0          | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -       |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040  
 FISCAL YEAR: 06/30/2018

COL. 1      COL. 2      COL. 3      COL. 4      COL. 5      COL. 6      COL. 7      COL. 8

| /// | DISTRIBUTION OF LOSS PER FTE              | LOOK UP | SCHED | CODE | NO. OF FTE'S | C x D1 | FTE'S ALLOCATED | BASIS | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|---|---------|-------|------|--------------|--------|-----------------|-------|-------------------------------|----------------|---------------|-------------------------|
| 30  | PREMATURE NURSERY                         | D15     | D15   | PRE  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 31  | CHRONIC CARE                              | D17     | D17   | CRH  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 32  | EMERGENCY SERVICES                        | D18     | D18   | EMG  | 93.9         | 12.0   | 1.4             | 7.96% | 298                           | 395            | 693           | 705.3                   |
| 33  | CLINICAL SERVICES                         | D19     | D19   | CL   | 30.1         | 3.9    | 0.2             | 0.87% | 32                            | 43             | 75            | 79.3                    |
| 34  | PSYCH. DAY & NIGHT CARE                   | D20     | D20   | PDC  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 35  | AMBULATORY SURGERY (PBP)                  | D21     | D21   | AMS  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 36  | SAME DAY SURGERY                          | D22     | D22   | SDS  | 9.6          | 1.2    | 0.1             | 0.56% | 21                            | 28             | 49            | 49.9                    |
| 37  | LABOR & DELIVERY SERVICES                 | D23     | D23   | DEL  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 38  | OPERATING ROOM                            | D24     | D24   | OR   | 69.2         | 8.8    | 0.4             | 2.01% | 75                            | 100            | 175           | 183.7                   |
| 39  | OPERATING ROOM CLINIC                     | D24a    | D24a  | ORC  | 4.0          | 0.5    | 0.0             | 0.21% | 8                             | 10             | 18            | 18.6                    |
| 40  | ANESTHESIOLOGY                            | D25     | D25   | ANS  | 4.8          | 0.6    | 0.1             | 0.42% | 16                            | 21             | 37            | 37.2                    |
| 41  | LABORATORY SERVICES                       | D28     | D28   | LAB  | 33.1         | 4.2    | 0.5             | 2.99% | 112                           | 149            | 261           | 265.0                   |
| 42  | ELECTROCARDIOGRAPHY                       | D30     | D30   | EKG  | 3.5          | 0.5    | 0.0             | 0.22% | 8                             | 11             | 19            | 19.4                    |
| 43  | INTERVENTIONAL RADIOLOGY / CARDIOVASCULAR | D31     | D31   | IRC  | 6.1          | 0.8    | 0.1             | 0.60% | 22                            | 30             | 52            | 53.0                    |
| 44  | RADIOLOGY-DIAGNOSTIC                      | D32     | D32   | RAD  | 34.0         | 4.4    | 0.5             | 2.99% | 112                           | 148            | 260           | 264.5                   |
| 45  | CT SCANNER                                | D33     | D33   | CAT  | 8.8          | 1.1    | 0.1             | 0.84% | 31                            | 42             | 73            | 74.0                    |
| 46  | RADIOLOGY-THERAPEUTIC                     | D34     | D34   | RAT  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 47  | NUCLEAR MEDICINE                          | D35     | D35   | NUC  | 3.2          | 0.4    | 0.0             | 0.23% | 9                             | 12             | 20            | 20.9                    |
| 48  | RESPIRATORY THERAPY                       | D36     | D36   | RES  | 21.6         | 2.8    | 0.2             | 1.25% | 47                            | 62             | 109           | 111.8                   |
| 49  | PULMONARY FUNCTION TESTING                | D37     | D37   | PUL  | 1.4          | 0.2    | 0.0             | 0.10% | 4                             | 5              | 9             | 8.9                     |
| 50  | ELECTROENCEPHALOGRAPHY                    | D38     | D38   | EEG  | 3.6          | 0.5    | 0.0             | 0.25% | 9                             | 12             | 21            | 21.9                    |
| 51  | PHYSICAL THERAPY                          | D39     | D39   | PTH  | 9.5          | 1.2    | 0.2             | 1.05% | 39                            | 52             | 91            | 92.5                    |
| 52  | OCCUPATIONAL THERAPY                      | D40     | D40   | OTH  | 2.2          | 0.3    | 0.1             | 0.30% | 11                            | 15             | 26            | 26.4                    |
| 53  | SPEECH LANGUAGE PATHOLOGY                 | D41     | D41   | STH  | 1.9          | 0.2    | 0.0             | 0.14% | 5                             | 7              | 12            | 12.7                    |
| 54  | RECREATIONAL THERAPY                      | D42     | D42   | REC  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 55  | AUDIOLOGY                                 | D43     | D43   | AUD  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 56  | OTHER PHYSICAL MEDICINE                   | D44     | D44   | OPM  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 57  | RENAL DIALYSIS                            | D45     | D45   | RDL  | 0.0          | 0.0    | 0.0             | 0.26% | 10                            | 13             | 23            | 22.5                    |
| 58  | ORGAN ACQUISITION                         | D46     | D46   | OA   | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 59  | AMBULATORY SURGERY                        | D47     | D47   | AOR  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 60  | LEUKOPHERESIS                             | D48     | D48   | LEU  | 0.0          | 0.0    | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 61  | HYPERBARIC CHAMBER                        | D49     | D49   | HYP  | 0.9          | 0.1    | 0.0             | 0.03% | 1                             | 1              | 2             | 2.5                     |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: NORTHWEST HOSPITAL

INSTITUTION NUMBER: 210040

FISCAL YEAR: 06/30/2018

COL. 1      COL. 2      COL. 3      COL. 4      COL. 5      COL. 6      COL. 7      COL. 8

| /// | DISTRIBUTION OF LOSS PER FTE         | LOOK UP        | SCHED          | CODE           | NO. OF FTE'S | C x DI         | FTE'S ALLOCATED | BASIS | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|--------------------------------------|----------------|----------------|----------------|--------------|----------------|-----------------|-------|-------------------------------|----------------|---------------|-------------------------|
| 62  | FREE STANDING EMERGENCY              | D50            | D50            | FSE            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 63  | MAGNETIC RESONANCE IMAGING           | D51            | D51            | MRI            | 4.4          | 0.6            | 0.1             | 0.59% | 22                            | 29             | 52            | 52.2                    |
| 64  | ADOLESCENT DUAL DIAGNOSED            | D52            | D52            | ADD            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 65  | LITHOTRIPSY                          | D53            | D53            | LIT            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 66  | REHABILITATION                       | D54            | D54            | RHB            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 67  | OBSERVATION                          | D55            | D55            | OBV            | 19.3         | 2.5            | 0.1             | 0.77% | 29                            | 38             | 67            | 69.4                    |
| 68  | AMBULANCE SERVICES-REBUNDLED         | D56            | D56            | AMR            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 69  | TRANSURETHAL MICROWAVE THERMOTHERAPY | D57            | D57            | TMT            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 70  | ONCOLOGY O/P CLINIC                  | D58            | D58            | OCL            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 71  | TRANSURETHAL NEEDLE ABLATION         | D59            | D59            | TNA            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 72  | PSYCHIATRIC ADULT                    | D70            | D70            | PAD            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 73  | PSYCHIATRIC CHILD/ADOLESCENT         | D71            | D71            | PCD            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 74  | PSYCHIATRIC GERIATRIC                | D73            | D73            | PSG            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 75  | INDIVIDUAL THERAPIES                 | D74            | D74            | ITH            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 76  | GROUP THERAPIES                      | D75            | D75            | GTH            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 77  | FAMILY THERAPIES                     | D76            | D76            | FTH            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 78  | PSYCHOLOGICAL TESTING                | D77            | D77            | PST            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 79  | EDUCATION                            | D78            | D78            | PSE            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 80  | OTHER THERAPIES                      | D79            | D79            | OPT            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 81  | ELECTROCONVULSIVE THERAPY            | D80            | D80            | ETH            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 82  | ACTIVITY THERAPIES                   | D81            | D81            | ATH            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 83  | PEDIATRIC STEP-DOWN                  | D82            | D82            | PSD            | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 84  | 340B CLINIC SERVICES                 | D83            | D83            | CL-340         | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 85  | 340B RADIOLOGY - THERAPEUTIC         | D84            | D84            | RAT-340        | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 86  | 340B OR CLINIC SERVICES              | D85            | D85            | ORC-340        | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 87  | 340B LABORATORY SERVICES             | D86            | D86            | LAB-340        | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 88  | 340B DRUGS                           | D87            | D87            | CDS-340        | 0.0          | 0.0            | 0.0             | 0.00% | 0                             | 0              | 0             | -                       |
| 89  | AMBULANCE SERVICES                   | E01            | E01            | AMB            | 0.0          | 0.0            |                 |       |                               |                |               | -                       |
| 90  | <del>PARKING</del>                   | <del>E02</del> | <del>E02</del> | <del>PAR</del> |              | <del>0.0</del> |                 |       |                               |                |               | -                       |
| 91  | DOCTOR'S PRIVATE OFFICE RENT         | E03            | E03            | DPO            | 1.3          | 0.2            |                 |       |                               |                |               | 0.2                     |
| 92  | OFFICE & OTHER RENTAL                | E04            | E04            | OOR            | 0.0          | 0.0            |                 |       |                               |                |               | -                       |
| 93  | RETAIL OPERATIONS                    | E05            | E05            | REO            | 17.3         | 2.2            |                 |       |                               |                |               | 2.2                     |
| 94  | PATIENTS TELEPHONES                  | E06            | E06            | PTE            | 0.0          | 0.0            |                 |       |                               |                |               | -                       |
| 95  | RESEARCH                             | F01            | F01            | REG            | 0.9          | 0.1            |                 |       |                               |                |               | 0.1                     |
| 96  | NURSING EDUCATION                    | F02            | F02            | RNS            | 0.0          | 0.0            |                 |       |                               |                |               | -                       |
| 97  | OTHER HEALTH PROFESSION EDUCATION    | F03            | F03            | OHE            | 0.0          | 0.0            |                 |       |                               |                |               | -                       |
| 98  | COMMUNITY HEALTH EDUCATION           | F04            | F04            | CHE            | 4.2          | 0.5            |                 |       |                               |                |               | 0.5                     |
| 99  | MED/SURG ACUTE                       | D01            | P2A            | MSG            | 0.0          | 0.0            |                 |       |                               |                |               | -                       |
| 100 | PEDIATRIC ACUTE                      | D02            | P2A            | PED            | 0.0          | 0.0            |                 |       |                               |                |               | -                       |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

OADP D

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040  
 FISCAL YEAR: 06/30/2018

COL. 1      COL. 2      COL. 3      COL. 4      COL. 5      COL. 6      COL. 7      COL. 8

| /// | DISTRIBUTION OF LOSS PER FTE              | LOOK UP | SCHED | CODE | NO. OF FTE'S | C x D1 | FTE'S ALLOCATED | BASIS | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|---|---------|-------|------|--------------|--------|-----------------|-------|-------------------------------|----------------|---------------|-------------------------|
| 101 | PSYCHIATRIC ACUTE                         | D03     | P2A   | PSY  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 102 | OBSTETRICS ACUTE                          | D04     | P2A   | OBS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 103 | DEFINITIVE OBSERVATION                    | D05     | P2A   | DEF  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 104 | MED/SURG INTENSIVE CARE                   | D06     | P2A   | MIS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 105 | CORONARY CARE                             | D07     | P2A   | CCU  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 106 | PEDIATRIC INTENSIVE CARE                  | D08     | P2A   | PIC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 107 | NEONATAL INTENSIVE CARE                   | D09     | P2A   | NEO  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 108 | BURN CARE                                 | D10     | P2A   | BUR  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 109 | PSYCHIATRIC INTENSIVE CARE                | D11     | P2A   | PSI  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 110 | SHOCK TRAUMA                              | D12     | P2A   | TRM  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 111 | ONCOLOGY                                  | D13     | P2A   | ONC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 112 | NEWBORN NURSERY                           | D14     | P2A   | NUR  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 113 | PREMATURE NURSERY                         | D15     | P2B   | PRE  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 114 | CHRONIC CARE                              | D17     | P2B   | CRH  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 115 | EMERGENCY SERVICES                        | D18     | P2B   | EMG  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 116 | CLINICAL SERVICES                         | D19     | P2B   | CL   | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 117 | PSYCH. DAY & NIGHT CARE                   | D20     | P2B   | PDC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 118 | AMBULATORY SURGERY (PBP)                  | D21     | P2B   | AMS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 119 | SAME DAY SURGERY                          | D22     | P2B   | SDS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 120 | LABOR & DELIVERY SERVICES                 | D23     | P2B   | DEL  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 121 | OPERATING ROOM                            | D24     | P2B   | OR   | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 122 | OPERATING ROOM CLINIC                     | D24a    | P2B   | ORC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 123 | ANESTHESIOLOGY                            | D25     | P2B   | ANS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 124 | LABORATORY SERVICES                       | D28     | P2B   | LAB  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 125 | ELECTROCARDIOGRAPHY                       | D30     | P2B   | EKG  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 126 | INTERVENTIONAL RADIOLOGY / CARDIOVASCULAR | D31     | P2B   | IRC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 127 | RADIOLOGY-DIAGNOSTIC                      | D32     | P2C   | RAD  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 128 | CT SCANNER                                | D33     | P2C   | CAT  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 129 | RADIOLOGY-THERAPEUTIC                     | D34     | P2C   | RAT  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 130 | NUCLEAR MEDICINE                          | D35     | P2C   | NUC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 131 | RESPIRATORY THERAPY                       | D36     | P2C   | RES  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040  
 FISCAL YEAR: 06/30/2018

COL. 1      COL. 2      COL. 3      COL. 4      COL. 5      COL. 6      COL. 7      COL. 8

| /// | DISTRIBUTION OF LOSS PER FTE         | LOOK UP | SCHED | CODE    | NO. OF FTE'S | C x D1 | FTE'S ALLOCATED | BASIS | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|--------------------------------------|---------|-------|---------|--------------|--------|-----------------|-------|-------------------------------|----------------|---------------|-------------------------|
| 132 | PULMONARY FUNCTION TESTING           | D37     | P2C   | PUL     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 133 | ELECTROENCEPHALOGRAPHY               | D38     | P2C   | EEG     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 134 | PHYSICAL THERAPY                     | D39     | P2C   | PTH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 135 | OCCUPATIONAL THERAPY                 | D40     | P2C   | OTH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 136 | SPEECH LANGUAGE PATHOLOGY            | D41     | P2C   | STH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 137 | RECREATIONAL THERAPY                 | D42     | P2C   | REC     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 138 | AUDIOLOGY                            | D43     | P2C   | AUD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 139 | OTHER PHYSICAL MEDICINE              | D44     | P2C   | OPM     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 140 | RENAL DIALYSIS                       | D45     | P2C   | RDL     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 141 | ORGAN ACQUISITION                    | D46     | P2D   | OA      | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 142 | AMBULATORY SURGERY                   | D47     | P2D   | AOR     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 143 | LEUKOPHERESIS                        | D48     | P2D   | LEU     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 144 | HYPERBARIC CHAMBER                   | D49     | P2D   | HYP     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 145 | FREE STANDING EMERGENCY              | D50     | P2D   | FSE     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 146 | MAGNETIC RESONANCE IMAGING           | D51     | P2D   | MRI     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 147 | ADOLESCENT DUAL DIAGNOSED            | D52     | P2D   | ADD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 148 | LITHOTRIPSY                          | D53     | P2D   | LIT     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 149 | REHABILITATION                       | D54     | P2D   | RHB     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 150 | OBSERVATION                          | D55     | P2D   | OBV     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 151 | TRANSURETHAL MICROWAVE THERMOTHERAPY | D57     | P2D   | TMT     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 152 | ONCOLOGY O/P CLINIC                  | D58     | P2D   | OCL     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 153 | TRANSURETHAL NEEDLE ABLATION         | D59     | P2D   | TNA     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 154 | PSYCHIATRIC ADULT                    | D70     | P2D   | PAD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 155 | PSYCHIATRIC CHILD/ADOLESCENT         | D71     | P2E   | PCD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 156 | PSYCHIATRIC GERIATRIC                | D73     | P2E   | PSG     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 157 | INDIVIDUAL THERAPIES                 | D74     | P2E   | ITH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 158 | GROUP THERAPIES                      | D75     | P2E   | GTH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 159 | FAMILY THERAPIES                     | D76     | P2E   | FTH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 160 | PSYCHOLOGICAL TESTING                | D77     | P2E   | PST     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 161 | EDUCATION                            | D78     | P2E   | PSE     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 162 | OTHER THERAPIES                      | D79     | P2E   | OPT     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 163 | ELECTROCONVULSIVE THERAPY            | D80     | P2E   | ETH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 164 | ACTIVITY THERAPIES                   | D81     | P2E   | ATH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 165 | PEDIATRIC STEP-DOWN                  | D82     | P2E   | PSD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 166 | 340B CLINIC SERVICES                 | D83     | P2E   | CL-340  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 167 | 340B RADIOLOGY - THERAPEUTIC         | D84     | P2E   | RAT-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 168 | 340B OR CLINIC SERVICES              | D85     | P2E   | ORC-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 169 | 340B LABORATORY SERVICES             | D86     | P2F   | LAB-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 170 | 340B DRUGS                           | D87     | P2F   | CDS-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 171 | MED/SURG ACUTE                       | D01     | P3    | MSG     | 0.2          | 0.0    |                 |       |                               |                |               | 0.0                     |
| 172 | PEDIATRIC ACUTE                      | D02     | P3    | PED     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 173 | PSYCHIATRIC ACUTE                    | D03     | P3    | PSY     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 174 | OBSTETRICS ACUTE                     | D04     | P3    | OBS     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

OADP F

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040  
 FISCAL YEAR: 06/30/2018

COL. 1 COL. 2 COL. 3 COL. 4 COL. 5 COL. 6 COL. 7 COL. 8

| /// | DISTRIBUTION OF LOSS PER FTE              | LOOK UP | SCHED | CODE | NO. OF FTE'S | C x D1 | FTE'S ALLOCATED | BASIS | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|---|---------|-------|------|--------------|--------|-----------------|-------|-------------------------------|----------------|---------------|-------------------------|
| 175 | DEFINITIVE OBSERVATION                    | D05     | P3    | DEF  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 176 | MED/SURG INTENSIVE CARE                   | D06     | P3    | MIS  | 0.5          | 0.1    |                 |       |                               |                |               | 0.1                     |
| 177 | CORONARY CARE                             | D07     | P3    | CCU  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 178 | PEDIATRIC INTENSIVE CARE                  | D08     | P3    | PIC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 179 | NEONATAL INTENSIVE CARE                   | D09     | P3    | NEO  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 180 | BURN CARE                                 | D10     | P3    | BUR  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 181 | PSYCHIATRIC INTENSIVE CARE                | D11     | P3    | PSI  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 182 | SHOCK TRAUMA                              | D12     | P3    | TRM  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 183 | ONCOLOGY                                  | D13     | P3    | ONC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 184 | NEWBORN NURSERY                           | D14     | P3    | NUR  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 185 | PREMATURE NURSERY                         | D15     | P3    | PRE  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 186 | CHRONIC CARE                              | D17     | P3    | CRH  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 187 | EMERGENCY SERVICES                        | D18     | P3    | EMG  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 188 | CLINICAL SERVICES                         | D19     | P3    | CL   | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 189 | PSYCH. DAY & NIGHT CARE                   | D20     | P3    | PDC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 190 | AMBULATORY SURGERY (PBP)                  | D21     | P3    | AMS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 191 | SAME DAY SURGERY                          | D22     | P3    | SDS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 192 | LABOR & DELIVERY SERVICES                 | D23     | P3    | DEL  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 193 | OPERATING ROOM                            | D24     | P3    | OR   | 0.4          | 0.1    |                 |       |                               |                |               | 0.1                     |
| 194 | OPERATING ROOM CLINIC                     | D24a    | P3    | ORC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 195 | ANESTHESIOLOGY                            | D25     | P3    | ANS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 196 | LABORATORY SERVICES                       | D28     | P3    | LAB  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 197 | ELECTROCARDIOGRAPHY                       | D30     | P3    | EKG  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 198 | INTERVENTIONAL RADIOLOGY / CARDIOVASCULAR | D31     | P3    | IRC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 199 | RADIOLOGY-DIAGNOSTIC                      | D32     | P3    | RAD  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 200 | CT SCANNER                                | D33     | P3    | CAT  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 201 | RADIOLOGY-THERAPEUTIC                     | D34     | P3    | RAT  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 202 | NUCLEAR MEDICINE                          | D35     | P3    | NUC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 203 | RESPIRATORY THERAPY                       | D36     | P3    | RES  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 204 | PULMONARY FUNCTION TESTING                | D37     | P3    | PUL  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 205 | ELECTROENCEPHALOGRAPHY                    | D38     | P3    | EEG  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 206 | PHYSICAL THERAPY                          | D39     | P3    | PTH  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040  
 FISCAL YEAR: 06/30/2018

COL. 1      COL. 2      COL. 3      COL. 4      COL. 5      COL. 6      COL. 7      COL. 8

| /// | DISTRIBUTION OF LOSS PER FTE         | LOOK UP | SCHED | CODE    | NO. OF FTE'S | C x D1 | FTE'S ALLOCATED | BASIS | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|--------------------------------------|---------|-------|---------|--------------|--------|-----------------|-------|-------------------------------|----------------|---------------|-------------------------|
| 207 | OCCUPATIONAL THERAPY                 | D40     | P3    | OTH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 208 | SPEECH LANGUAGE PATHOLOGY            | D41     | P3    | STH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 209 | RECREATIONAL THERAPY                 | D42     | P3    | REC     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 210 | AUDIOLOGY                            | D43     | P3    | AUD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 211 | OTHER PHYSICAL MEDICINE              | D44     | P3    | OPM     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 212 | RENAL DIALYSIS                       | D45     | P3    | RDL     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 213 | ORGAN ACQUISITION                    | D46     | P3    | OA      | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 214 | AMBULATORY SURGERY                   | D47     | P3    | AOR     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 215 | LEUKOPHERESIS                        | D48     | P3    | LEU     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 216 | HYPERBARIC CHAMBER                   | D49     | P3    | HYP     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 217 | FREE STANDING EMERGENCY              | D50     | P3    | FSE     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 218 | MAGNETIC RESONANCE IMAGING           | D51     | P3    | MRI     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 219 | ADOLESCENT DUAL DIAGNOSED            | D52     | P3    | ADD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 220 | LITHOTRIPSY                          | D53     | P3    | LIT     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 221 | REHABILITATION                       | D54     | P3    | RHB     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 222 | OBSERVATION                          | D55     | P3    | OBV     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 223 | TRANSURETHAL MICROWAVE THERMOTHERAPY | D57     | P3    | TMT     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 224 | ONCOLOGY O/P CLINIC                  | D58     | P3    | OCL     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 225 | TRANSURETHAL NEEDLE ABLATION         | D59     | P3    | TNA     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 226 | PSYCHIATRIC ADULT                    | D70     | P3    | PAD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 227 | PSYCHIATRIC CHILD/ADOLESCENT         | D71     | P3    | PCD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 228 | PSYCHIATRIC GERIATRIC                | D73     | P3    | PSG     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 229 | INDIVIDUAL THERAPIES                 | D74     | P3    | ITH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 230 | GROUP THERAPIES                      | D75     | P3    | GTH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 231 | FAMILY THERAPIES                     | D76     | P3    | FTH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 232 | PSYCHOLOGICAL TESTING                | D77     | P3    | PST     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 233 | EDUCATION                            | D78     | P3    | PSE     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 234 | OTHER THERAPIES                      | D79     | P3    | OPT     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 235 | ELECTROCONVULSIVE THERAPY            | D80     | P3    | ETH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 236 | ACTIVITY THERAPIES                   | D81     | P3    | ATH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 236 | PEDIATRIC STEP-DOWN                  | D82     | P3    | PSD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 237 | 340B CLINIC SERVICES                 | D83     | P3    | CL-340  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 238 | 340B RADIOLOGY - THERAPEUTIC         | D84     | P3    | RAT-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 239 | 340B OR CLINIC SERVICES              | D85     | P3    | ORC-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 240 | 340B LABORATORY SERVICES             | D86     | P3    | LAB-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 241 | 340B DRUGS                           | D87     | P3    | CDS-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 242 | MED/SURG ACUTE                       | D01     | P4A   | MSG     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 243 | PEDIATRIC ACUTE                      | D02     | P4A   | PED     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 244 | PSYCHIATRIC ACUTE                    | D03     | P4A   | PSY     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 245 | OBSTETRICS ACUTE                     | D04     | P4A   | OBS     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 246 | DEFINITIVE OBSERVATION               | D05     | P4A   | DEF     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 247 | MED/SURG INTENSIVE CARE              | D06     | P4A   | MIS     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 248 | CORONARY CARE                        | D07     | P4A   | CCU     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 249 | PEDIATRIC INTENSIVE CARE             | D08     | P4B   | PIC     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 250 | NEONATAL INTENSIVE CARE              | D09     | P4B   | NEO     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 251 | BURN CARE                            | D10     | P4B   | BUR     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 252 | PSYCHIATRIC INTENSIVE CARE           | D11     | P4B   | PSI     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 253 | SHOCK TRAUMA                         | D12     | P4B   | TRM     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 254 | ONCOLOGY                             | D13     | P4B   | ONC     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 255 | NEWBORN NURSERY                      | D14     | P4B   | NUR     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 256 | PREMATURE NURSERY                    | D15     | P4C   | PRE     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 257 | CHRONIC CARE                         | D17     | P4C   | CRH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 258 | EMERGENCY SERVICES                   | D18     | P4C   | EMG     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |





ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

OADP H

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040  
 FISCAL YEAR: 06/30/2018

COL. 1 COL. 2 COL. 3 COL. 4 COL. 5 COL. 6 COL. 7 COL. 8

| /// | DISTRIBUTION OF LOSS PER FTE              | LOOK UP | SCHED | CODE | NO. OF FTE'S | C x D1 | FTE'S ALLOCATED | BASIS | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|---|---------|-------|------|--------------|--------|-----------------|-------|-------------------------------|----------------|---------------|-------------------------|
| 259 | CLINICAL SERVICES                         | D19     | P4C   | CL   | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 260 | PSYCH. DAY & NIGHT CARE                   | D20     | P4C   | PDC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 261 | AMBULATORY SURGERY (PBP)                  | D21     | P4C   | AMS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 262 | SAME DAY SURGERY                          | D22     | P4C   | SDS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 263 | LABOR & DELIVERY SERVICES                 | D23     | P4D   | DEL  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 264 | OPERATING ROOM                            | D24     | P4D   | OR   | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 265 | OPERATING ROOM CLINIC                     | D24a    | P4D   | ORC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 266 | ANESTHESIOLOGY                            | D25     | P4D   | ANS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 267 | LABORATORY SERVICES                       | D28     | P4D   | LAB  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 268 | ELECTROCARDIOGRAPHY                       | D30     | P4D   | EKG  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 269 | INTERVENTIONAL RADIOLOGY / CARDIOVASCULAR | D31     | P4D   | IRC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 270 | RADIOLOGY-DIAGNOSTIC                      | D32     | P4E   | RAD  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 271 | CT SCANNER                                | D33     | P4E   | CAT  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 272 | RADIOLOGY-THERAPEUTIC                     | D34     | P4E   | RAT  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 273 | NUCLEAR MEDICINE                          | D35     | P4E   | NUC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 274 | RESPIRATORY THERAPY                       | D36     | P4E   | RES  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 275 | PULMONARY FUNCTION TESTING                | D37     | P4E   | PUL  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 276 | ELECTROENCEPHALOGRAPHY                    | D38     | P4E   | EEG  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 277 | PHYSICAL THERAPY                          | D39     | P4F   | PTH  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 278 | OCCUPATIONAL THERAPY                      | D40     | P4F   | OTH  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 279 | SPEECH LANGUAGE PATHOLOGY                 | D41     | P4F   | STH  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 280 | RECREATIONAL THERAPY                      | D42     | P4F   | REC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 281 | AUDIOLOGY                                 | D43     | P4F   | AUD  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 282 | OTHER PHYSICAL MEDICINE                   | D44     | P4F   | OPM  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 283 | RENAL DIALYSIS                            | D45     | P4F   | RDL  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 284 | ORGAN ACQUISITION                         | D46     | P4G   | OA   | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 285 | AMBULATORY SURGERY                        | D47     | P4G   | AOR  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 286 | LEUKOPHERESIS                             | D48     | P4G   | LEU  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 287 | HYPERBARIC CHAMBER                        | D49     | P4G   | HYP  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 288 | FREE STANDING EMERGENCY                   | D50     | P4G   | FSE  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 289 | MAGNETIC RESONANCE IMAGING                | D51     | P4G   | MRI  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 290 | ADOLESCENT DUAL DIAGNOSED                 | D52     | P4G   | ADD  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040  
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COL. 1      COL. 2      COL. 3      COL. 4      COL. 5      COL. 6      COL. 7      COL. 8

| /// | DISTRIBUTION OF LOSS PER FTE         | LOOK UP | SCHED | CODE    | NO. OF FTE'S | C x D1 | FTE'S ALLOCATED | BASIS | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|--------------------------------------|---------|-------|---------|--------------|--------|-----------------|-------|-------------------------------|----------------|---------------|-------------------------|
| 291 | LITHOTRIPSY                          | D53     | P4H   | LIT     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 292 | REHABILITATION                       | D54     | P4H   | RHB     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 293 | OBSERVATION                          | D55     | P4H   | OBV     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 294 | TRANSURETHAL MICROWAVE THERMOTHERAPY | D57     | P4H   | TMT     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 295 | ONCOLOGY O/P CLINIC                  | D58     | P4H   | OCL     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 296 | TRANSURETHAL NEEDLE ABLATION         | D59     | P4H   | TNA     |              | 0.0    |                 |       |                               |                |               | -                       |
| 297 | PSYCHIATRIC ADULT                    | D70     | P4H   | PAD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 298 | PSYCHIATRIC CHIL/D/ADOLESCENT        | D71     | P4I   | PCD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 299 | PSYCHIATRIC GERIATRIC                | D73     | P4I   | PSG     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 300 | INDIVIDUAL THERAPIES                 | D74     | P4I   | ITH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 301 | GROUP THERAPIES                      | D75     | P4I   | GTH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 302 | FAMILY THERAPIES                     | D76     | P4I   | FTH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 303 | PSYCHOLOGICAL TESTING                | D77     | P4I   | PST     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 304 | EDUCATION                            | D78     | P4I   | PSE     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 305 | OTHER THERAPIES                      | D79     | P4J   | OPT     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 306 | ELECTROCONVULSIVE THERAPY            | D80     | P4J   | ETH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 307 | ACTIVITY THERAPIES                   | D81     | P4J   | ATH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 307 | PEDIATRIC STEP-DOWN                  | D82     | P4J   | PSD     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 308 | 340B CLINIC SERVICES                 | D83     | P4J   | CL-340  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 309 | 340B RADIOLOGY - THERAPEUTIC         | D84     | P4J   | RAT-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 310 | 340B OR CLINIC SERVICES              | D85     | P4J   | ORC-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 311 | 340B LABORATORY SERVICES             | D86     | P4K   | LAB-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 312 | 340B DRUGS                           | D87     | P4K   | CDS-340 | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 313 | MED/SURG ACUTE                       | D01     | P5A   | MSG     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 314 | PEDIATRIC ACUTE                      | D02     | P5A   | PED     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 315 | PSYCHIATRIC ACUTE                    | D03     | P5A   | PSY     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 316 | OBSTETRICS ACUTE                     | D04     | P5A   | OBS     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 317 | DEFINITIVE OBSERVATION               | D05     | P5A   | DEF     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 318 | MED/SURG INTENSIVE CARE              | D06     | P5A   | MIS     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 319 | CORONARY CARE                        | D07     | P5A   | CCU     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 320 | PEDIATRIC INTENSIVE CARE             | D08     | P5B   | PIC     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 321 | NEONATAL INTENSIVE CARE              | D09     | P5B   | NEO     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 322 | BURN CARE                            | D10     | P5B   | BUR     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 323 | PSYCHIATRIC INTENSIVE CARE           | D11     | P5B   | PSI     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 324 | SHOCK TRAUMA                         | D12     | P5B   | TRM     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 325 | ONCOLOGY                             | D13     | P5B   | ONC     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 326 | NEWBORN NURSERY                      | D14     | P5B   | NUR     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 327 | PREMATURE NURSERY                    | D15     | P5C   | PRE     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 328 | CHRONIC CARE                         | D17     | P5C   | CRH     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 329 | EMERGENCY SERVICES                   | D18     | P5C   | EMG     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 330 | CLINICAL SERVICES                    | D19     | P5C   | CL      | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 331 | PSYCH. DAY & NIGHT CARE              | D20     | P5C   | PDC     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 332 | AMBULATORY SURGERY (PBP)             | D21     | P5C   | AMS     | 0.0          | 0.0    |                 |       |                               |                |               | -                       |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040  
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COL. 1      COL. 2      COL. 3      COL. 4      COL. 5      COL. 6      COL. 7      COL. 8

| /// | DISTRIBUTION OF LOSS PER FTE              | LOOK UP | SCHED | CODE | NO. OF FTE'S | C x D1 | FTE'S ALLOCATED | BASIS | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|---|---------|-------|------|--------------|--------|-----------------|-------|-------------------------------|----------------|---------------|-------------------------|
| 333 | SAME DAY SURGERY                          | D22     | P5C   | SDS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 334 | LABOR & DELIVERY SERVICES                 | D23     | P5D   | DEL  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 335 | OPERATING ROOM                            | D24     | P5D   | OR   | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 336 | OPERATING ROOM CLINIC                     | D24a    | P5D   | ORC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 337 | ANESTHESIOLOGY                            | D25     | P5D   | ANS  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 338 | LABORATORY SERVICES                       | D28     | P5D   | LAB  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 339 | ELECTROCARDIOGRAPHY                       | D30     | P5D   | EKG  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 340 | INTERVENTIONAL RADIOLOGY / CARDIOVASCULAR | D31     | P5D   | IRC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 341 | RADIOLOGY-DIAGNOSTIC                      | D32     | P5E   | RAD  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 342 | CT SCANNER                                | D33     | P5E   | CAT  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 343 | RADIOLOGY-THERAPEUTIC                     | D34     | P5E   | RAT  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 344 | NUCLEAR MEDICINE                          | D35     | P5E   | NUC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 345 | RESPIRATORY THERAPY                       | D36     | P5E   | RES  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 346 | PULMONARY FUNCTION TESTING                | D37     | P5E   | PUL  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 347 | ELECTROENCEPHALOGRAPHY                    | D38     | P5E   | EEG  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 348 | PHYSICAL THERAPY                          | D39     | P5F   | PTH  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 349 | OCCUPATIONAL THERAPY                      | D40     | P5F   | OTH  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 350 | SPEECH LANGUAGE PATHOLOGY                 | D41     | P5F   | STH  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 351 | RECREATIONAL THERAPY                      | D42     | P5F   | REC  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 352 | AUDIOLOGY                                 | D43     | P5F   | AUD  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 353 | OTHER PHYSICAL MEDICINE                   | D44     | P5F   | OPM  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 354 | RENAL DIALYSIS                            | D45     | P5F   | RDL  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 355 | ORGAN ACQUISITION                         | D46     | P5G   | OA   | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 356 | AMBULATORY SURGERY                        | D47     | P5G   | AOR  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 357 | LEUKOPHERESIS                             | D48     | P5G   | LEU  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 358 | HYPERBARIC CHAMBER                        | D49     | P5G   | HYP  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 359 | FREE STANDING EMERGENCY                   | D50     | P5G   | FSE  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 360 | MAGNETIC RESONANCE IMAGING                | D51     | P5G   | MRI  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 361 | ADOLESCENT DUAL DIAGNOSED                 | D52     | P5G   | ADD  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 362 | LITHOTRIPSY                               | D53     | P5H   | LIT  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 363 | REHABILITATION                            | D54     | P5H   | RHB  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 364 | OBSERVATION                               | D55     | P5H   | OBV  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 365 | TRANSURETHAL MICROWAVE THERMOTHERAPY      | D57     | P5H   | TMT  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 366 | ONCOLOGY O/P CLINIC                       | D58     | P5H   | OCL  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 367 | TRANSURETHAL NEEDLE ABLATION              | D59     | P5H   | TNA  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |
| 368 | PSYCHIATRIC ADULT                         | D70     | P5H   | PAD  | 0.0          | 0.0    |                 |       |                               |                |               | -                       |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

OADP K

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040  
 FISCAL YEAR: 06/30/2018

COL. 1 COL. 2 COL. 3 COL. 4 COL. 5 COL. 6 COL. 7 COL. 8

| /// | DISTRIBUTION OF LOSS PER FTE | LOOK UP | SCHED | CODE    | NO. OF FTE'S | C x D1 | FTE'S ALLOCATED | BASIS   | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|------------------------------|---------|-------|---------|--------------|--------|-----------------|---------|-------------------------------|----------------|---------------|-------------------------|
| 369 | PSYCHIATRIC CHILD/ADOLESCENT | D71     | P5I   | PCD     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 370 | PSYCHIATRIC GERIATRIC        | D73     | P5I   | PSG     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 371 | INDIVIDUAL THERAPIES         | D74     | P5I   | ITH     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 372 | GROUP THERAPIES              | D75     | P5I   | GTH     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 373 | FAMILY THERAPIES             | D76     | P5I   | FTH     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 374 | PSYCHOLOGICAL TESTING        | D77     | P5I   | PST     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 375 | EDUCATION                    | D78     | P5I   | PSE     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 376 | OTHER THERAPIES              | D79     | P5J   | OPT     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 377 | ELECTROCONVULSIVE THERAPY    | D80     | P5J   | ETH     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 378 | ACTIVITY THERAPIES           | D81     | P5J   | ATH     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 378 | PEDIATRIC STEP-DOWN          | D82     | P5J   | PSD     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 379 | 340B CLINIC SERVICES         | D83     | P5J   | CL-340  | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 380 | 340B RADIOLOGY - THERAPEUTIC | D84     | P5J   | RAT-340 | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 381 | 340B OR CLINIC SERVICES      | D85     | P5J   | ORC-340 | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 382 | 340B LABORATORY SERVICES     | D86     | P5J   | LAB-340 | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 383 | 340B DRUGS                   | D87     | P5J   | CDS-340 | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 384 | FREESTANDING CLINIC SERVICES | UR01    | UR01  | FSC1    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 385 | HOME HEALTH SERVICES         | UR02    | UR02  | HHC     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 386 | OUTPATIENT RENAL DIALYSIS    | UR03    | UR03  | ORD     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 387 | SKILLED NURSING CARE         | UR04    | UR04  | ECF1    | 67.7         | 8.7    |                 |         |                               |                |               | 8.7                     |
| 388 | LABORATORY NON-PATIENT       | UR05    | UR05  | ULB     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 389 | PHYSICIANS PART B SERVICES   | UR06    | UR06  | UPB     | 95.6         | 12.2   |                 |         |                               |                |               | 12.2                    |
| 390 | CERTIFIED NURSE ANESTHETISTS | UR07    | UR07  | CNA     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 391 | PHYSICIAN SUPPORT SERVICES   | UR08    | UR08  | PSS     | 3.5          | 0.5    |                 |         |                               |                |               | 0.5                     |
| 392 | HOSPICE CARE                 | UR09    | UR09  | UR9     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 393 | TBD                          | UR10    | UR10  | TBA3    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 394 | TBD                          | UR11    | UR11  | TBA4    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 395 | TBD                          | UR12    | UR12  | TBA5    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 396 | TBD                          | UR13    | UR13  | TBA6    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 397 | TBD                          | UR14    | UR14  | TBA7    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 398 | TBD                          | UR15    | UR15  | TBA8    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| E   | TOTALS                       |         |       |         | 1,244.8      | 159.2  | 17.5            | 100.00% | 3,745.7                       | 4,963.5        | 8,709.2       | 8,868.4                 |

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

**RC**

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018  
 INSTITUTION NUMBER: 210040

|    | Expenses                            | Sources                         | HSCRC Regulated | Unregulated | Total      |    |
|----|-------------------------------------|---------------------------------|-----------------|-------------|------------|----|
| A  | Unassigned Expense                  | Sch. UA, Col. 10                | 27,420.1        | 567.4       | 27,987.5   | A  |
| B  | Physicians Part B Services          | P2 Ln A Col 7<br>UR6 Ln B Col 3 | 0.0             | 21,720.6    | 21,720.6   | B  |
| C  | Physician Support Services          | Sch. P3, Line A, Col. 7<br>UR   | 231.3           |             | 231.3      | C  |
| D  | Resident, Intern Services           | Sch. P4 & P5 , Line A, Col. 7   | 0.0             | 0.0         | 0.0        | D  |
| E  | Overhead Expense Survey             | Sch OES, Line P, Col. 1         | 56,655.3        | 3,794.4     | 60,449.7   | E  |
| F  | Patient Care Centers                | Schs D1 - D81, Line B, Col. 4   | 104,462.5       | //////////  | 104,462.5  | F  |
| G  | Auxiliary Enterprises               | Schs E1 - E9 Line B, Col 3      | 159.2           | 20,023.4    | 20,182.6   | G  |
| H  | Other Institution Programs          | Schs F1 - F4, Line B, Col 3     | //////////      | 880.7       | 880.7      | H  |
| I  | Unregulated Services                | Schs UR1-UR15 Less Ln B & C     | //////////      | 12,275.5    | 12,275.5   | I  |
| J  | Total Operating Expenses            | A+B+C+D+E+F+G+H+I               | 188,928.5       | 59,261.9    | 248,190.5  | J  |
| K  | Non-Operating Expenses              | Non-Operating Expenses          | //////////      | 0.0         | 0.0        | K  |
| L  | Total Expenses                      | J + K                           | 188,928.5       | 59,261.9    | 248,190.5  | L  |
| M  | Total Operating Expenses - RE       | Sche RE, Line S                 | 188,597.9       | 59,592.6    | 248,190.4  | M  |
| N  | Non-Operating Expenses - RE         | Sche RE, Line V                 | //////////      | 0.0         | 0.0        | N  |
| O  | Total Expenses - RE                 | M + N                           | 188,597.9       | 59,592.6    | 248,190.4  | O  |
| P  | Reconciliation Amount               | O - L                           | (330.7)         | 330.6       | (0.0)      | P  |
| Q  | Nomenclature                        | //////////                      | //////////      | //////////  | ////////// | Q  |
| Q1 | Other Non-Operating Expense         | Audited Financial Statements    | 0.0             | 0.0         | 0.0        | Q1 |
| Q2 | Rounding                            |                                 | 0.1             | (0.0)       | 0.0        | Q2 |
| Q3 | O/H Exp Alloc. to Aux Ent. Fringe   | E Schedules                     | 306.2           | (306.2)     | 0.0        | Q3 |
| Q4 | Aux Ent. Loss Allocated to F and UR | OA Schedule                     | 24.4            | (24.4)      | 0.0        | Q4 |
| Q5 | Ineligible Interns/Residents        | P5 Schedule                     | 0.0             | 0.0         | 0.0        | Q5 |
| Q6 |                                     |                                 |                 |             |            | Q6 |

## STATEMENT OF REVENUE AND EXPENSES

RE

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL

06/30/2018INSTITUTION NUMBER: 210040

|                                  |  | COL 1     | COL 2       | COL 3     |    |
|----------------------------------|--|-----------|-------------|-----------|----|
|                                  |  | Regulated | Unregulated | Total     |    |
| <b>Operating Revenues:</b>       |  | xxxx      | xxxx        | xxxx      |    |
| A                                | Gross Revenues from Daily Hospital Services                              | 67,252.7  | 12,859.9    | 80,112.6  | A  |
| B                                | Gross Revenues from Ambulatory Services                                  | 3,188.3   | 0.0         | 3,188.3   | B  |
| C                                | Gross Revenues from Inpatient Ancillary Services                         | 73,727.3  | 0.0         | 73,727.3  | C  |
| D                                | Gross Revenues from Outpatient Ancillary Services                        | 122,759.2 | 50,815.9    | 173,575.1 | D  |
| E                                | Gross Patient Revenues   | 266,927.6 | 63,675.7    | 330,603.4 | E  |
| <b>Deductions from Revenues:</b> |  | xxxx      | xxxx        | xxxx      |    |
| F                                | Provision for Bad Debts  | 9,479.2   | 4,231.3     | 13,710.5  | F  |
| G                                | Charity/Uncompensated Care   | 2,067.0   | 0.0         | 2,067.0   | G  |
| H                                | Contractual Adjustments  | 26,313.2  | 24,204.6    | 50,517.8  | H  |
| H1                               | Uncompensated Care Fund Payments   | 0.0       | 0.0         | 0.0       | H1 |
| H2                               | Denials  | 4,450.1   | 0.2         | 4,450.3   | H2 |
| I                                | Other Deductions from Revenues   | 0.0       | 0.0         | 0.0       | I  |
| J                                | Total Deductions from Revenues   | 42,309.4  | 28,436.2    | 70,745.6  | J  |
| J1                               | Uncompensated Care Fund Receipts   | 2,643.9   | 0.0         | 2,643.9   | J1 |
| K                                | Net Patient Revenues   | 227,262.1 | 35,239.6    | 262,501.7 | K  |
| L                                | Other Operating Revenues   | 4,036.4   | 3,336.8     | 7,373.2   | L  |
| M                                | Net Operating Revenues   | 231,298.5 | 38,576.4    | 269,874.9 | M  |
| <b>Operating Expenses:</b>       |  | xxxx      | xxxx        | xxxx      |    |
| N                                | Salaries, Wages, and Employee Benefits                                   | 109,108.4 | 28,321.1    | 137,429.5 | N  |
| O                                | Professional Fees  | 0.0       | 0.0         | 0.0       | O  |
| P                                | Supplies   | 49,835.0  | 0.0         | 49,835.0  | P  |
| Q                                | Depreciation/Amortization, Leases/Rentals                                | 15,617.3  | 567.4       | 16,184.7  | Q  |
| R                                | Other Expenses   | 14,037.2  | 30,704.1    | 44,741.3  | R  |
| S                                | Total Operating Expenses   | 188,597.9 | 59,592.6    | 248,190.4 | S  |
| T                                | <b>Excess (Deficit) Operating Revenues Over Operating Expenses</b>       | 42,700.7  | (21,016.2)  | 21,684.5  | T  |
| U                                | Non-Operating Revenues   | xxxx      | 6,622.7     | 6,622.7   | U  |
| V                                | Non-Operating Expenses   | xxxx      | 0.0         | 0.0       | V  |
| W                                | <b>Excess (Deficit) Revenues Over Expenses-Regulated and Unregulated</b> | 42,700.7  | (14,393.5)  | 28,307.2  | W  |
| X                                | Operating Expenses per EIPD  | 1.96892   | xxxx        | xxxx      | X  |
| Y                                | Operating Expenses per EIPA  | 9.70949   | xxxx        | xxxx      | Y  |
| Z                                | Working Capital Ratio = Current Assets/Current Liabilities               | 1.9       | xxxx        | xxxx      | Z  |
| AA                               | Admissions   | 10,259    | 769         | 11,028    | AA |
| BB                               | EIPA's   | 19,424    | 3,808       | 23,699    | BB |

**Schedule RE-R:  
Reconciliation of the Audited  
Financials to Schedule RE**

INSTITUTION NAME: NORTHWEST HOSPITAL

RE - R 1

INSTITUTION NO.: 210040

|                              | Col. 1                             | Col. 2                       | Col. 3                | Col. 4  | Col. 5     | Col. 6       | Col. 7      | Col. 8     | Col. 9    |
|------------------------------|------------------------------------|------------------------------|-----------------------|---------|------------|--------------|-------------|------------|-----------|
|                              | Audited<br>Financial<br>Statements | Miscellaneous<br>Adjustments | AUXILIARY ENTERPRISES |         |            |              |             |            |           |
|                              |                                    |                              | E01                   | E02     | E03        | E04          | E05         | E06        | E07       |
|                              |                                    |                              | Ambulance             | Parking | Dr. Office | Other Office | Retail Ops. | Pt. Phones | Cafeteria |
| Gross Patient Revenue        | 330,916.1                          | (312.7)                      | -                     | -       | -          | -            | 18,913.5    | -          | -         |
| Provision for Bad Debt       | 13,710.5                           | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Charity Care                 | 2,067.0                            | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Contractual Allowances       | 52,636.9                           | (312.7)                      | -                     | -       | -          | -            | -           | -          | -         |
| Total Deductions             | 68,414.4                           | (312.7)                      | -                     | -       | -          | -            | -           | -          | -         |
| Net Patient Revenue          | 262,501.6                          | -                            | -                     | -       | -          | -            | 18,913.5    | -          | -         |
| Other Operating Revenue      | 3,979.6                            | 3,393.6                      | -                     | -       | 830.0      | -            | -           | -          | 1,400.7   |
| Total Operating Revenue      | 266,481.3                          | 3,393.6                      | -                     | -       | 830.0      | -            | 18,913.5    | -          | 1,400.7   |
| <b>Operating Expenses:</b>   |                                    |                              |                       |         |            |              |             |            |           |
| Salaries, Wages and Benefits | 134,314.5                          | 3,115.0                      | -                     | -       | 118.7      | -            | 2,228.6     | -          | 244.8     |
| Professional Fees            | -                                  | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Supplies                     | 49,835.0                           | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Depreciation / Amortization  | 11,827.9                           | 2,011.5                      | -                     | -       | -          | -            | -           | -          | -         |
| Leases / Rentals             | -                                  | 2,345.2                      | -                     | -       | -          | -            | -           | -          | -         |
| Interest                     | 1,379.2                            | 2,873.9                      | -                     | -       | -          | -            | -           | -          | -         |
| Other Expenses               | 47,440.2                           | (6,952.0)                    | -                     | -       | 1,574.8    | 312.1        | 15,942.2    | -          | 1,155.9   |
| Total Operating Expense      | 244,796.9                          | 3,393.6                      | -                     | -       | 1,693.5    | 312.1        | 18,170.9    | -          | 1,400.7   |
| Income from Operations       | 21,684.4                           | -                            | -                     | -       | (863.5)    | (312.1)      | 742.6       | -          | (0.0)     |
| Non-Operating Revenues       | 6,622.7                            | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Non-Operating Expenses       | -                                  | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Excess Revenue Over Expenses | 28,307.1                           | -                            | -                     | -       | (863.5)    | (312.1)      | 742.6       | -          | (0.0)     |



**Schedule RE-R:  
Reconciliation of the Audited  
Financials to Schedule RE**

INSTITUTION NAME: NORTHWEST H

RE - R 2

INSTITUTION NO.: 210040

|                              | Col. 10               | Col. 11 | Col. 12                      | Col. 13     | Col. 14         | Col. 15         | Col. 16     | Col. 17     | Col. 18   |
|------------------------------|-----------------------|---------|------------------------------|-------------|-----------------|-----------------|-------------|-------------|-----------|
|                              | AUXILIARY ENTERPRISES |         | OTHER INSTITUTIONAL PROGRAMS |             |                 |                 | UNREGULATED |             |           |
|                              | E08                   | E09     | F01                          | F02         | F03             | F04             | UR01        | UR02        | UR03      |
|                              | Day Care              | Housing | Research                     | Nursing Ed. | Other Hlth. Ed. | Comm. Hlth. Ed. | FSC         | Home Health | O/P Renal |
| Gross Patient Revenue        | -                     | -       | 0.5                          | -           | -               | -               | -           | -           | -         |
| Provision for Bad Debt       | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Charity Care                 | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Contractual Allowances       | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Total Deductions             | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Net Patient Revenue          | -                     | -       | 0.5                          | -           | -               | -               | -           | -           | -         |
| Other Operating Revenue      | -                     | -       | 7.0                          | -           | -               | 427.6           | -           | -           | -         |
| Total Operating Revenue      | -                     | -       | 7.5                          | -           | -               | 427.6           | -           | -           | -         |
| <b>Operating Expenses:</b>   |                       |         |                              |             |                 |                 |             |             |           |
| Salaries, Wages and Benefits | -                     | -       | 0.7                          | -           | -               | 628.7           | -           | -           | -         |
| Professional Fees            | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Supplies                     | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Depreciation / Amortization  | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Leases / Rentals             | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Interest                     | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Other Expenses               | -                     | -       | 8.5                          | -           | -               | 314.5           | -           | -           | -         |
| Total Operating Expense      | -                     | -       | 9.2                          | -           | -               | 943.2           | -           | -           | -         |
| Income from Operations       | -                     | -       | (1.7)                        | -           | -               | (515.6)         | -           | -           | -         |
| Non-Operating Revenues       | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Non-Operating Expenses       | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Excess Revenue Over Expenses | -                     | -       | (1.7)                        | -           | -               | (515.6)         | -           | -           | -         |

**Schedule RE-R:  
Reconciliation of the Audited  
Financials to Schedule RE**

INSTITUTION NAME: NORTHWEST H

INSTITUTION NO.: 210040

|                              | Col. 19     | Col. 20     | Col. 21     | Col. 22 | Col. 23 | Col. 23a     | Col. 23b | Col. 23c | Col. 23d |
|------------------------------|-------------|-------------|-------------|---------|---------|--------------|----------|----------|----------|
|                              | UNREGULATED |             |             |         |         |              |          |          |          |
|                              | UR04        | UR05        | UR06        | UR07    | UR08    | UR09         | UR10     | UR11     | UR12     |
|                              | SNF         | Non-Pt. Lab | Phys. Pt. B | CNA     | PSS     | Hospice Care | TBD      | TBD      | TBD      |
| Gross Patient Revenue        | 12,859.9    | 7.1         | 31,894.8    | -       | -       | -            | -        | -        | -        |
| Provision for Bad Debt       | 284.3       | -           | 3,947.0     | -       | -       | -            | -        | -        | -        |
| Charity Care                 | -           | -           | -           | -       | -       | -            | -        | -        | -        |
| Contractual Allowances       | 6,955.9     | -           | 17,248.9    | -       | -       | -            | -        | -        | -        |
| Total Deductions             | 7,240.2     | -           | 21,196.0    | -       | -       | -            | -        | -        | -        |
| Net Patient Revenue          | 5,619.7     | 7.1         | 10,698.9    | -       | -       | -            | -        | -        | -        |
| Other Operating Revenue      | -           | -           | 188.2       | -       | -       | 483.3        | -        | -        | -        |
| Total Operating Revenue      | 5,619.7     | 7.1         | 10,887.1    | -       | -       | 483.3        | -        | -        | -        |
| <b>Operating Expenses:</b>   |             |             |             |         |         |              |          |          |          |
| Salaries, Wages and Benefits | 7,736.5     | -           | 16,822.8    | -       | 540.3   | -            | -        | -        | -        |
| Professional Fees            | -           | -           | -           | -       | -       | -            | -        | -        | -        |
| Supplies                     | -           | -           | -           | -       | -       | -            | -        | -        | -        |
| Depreciation / Amortization  | 567.4       | -           | -           | -       | -       | -            | -        | -        | -        |
| Leases / Rentals             | -           | -           | -           | -       | -       | -            | -        | -        | -        |
| Interest                     | -           | -           | -           | -       | -       | -            | -        | -        | -        |
| Other Expenses               | 5,016.6     | -           | 6,306.9     | -       | -       | 72.6         | -        | -        | -        |
| Total Operating Expense      | 13,320.5    | -           | 23,129.7    | -       | 540.3   | 72.6         | -        | -        | -        |
| Income from Operations       | (7,700.9)   | 7.1         | (12,242.6)  | -       | (540.3) | 410.7        | -        | -        | -        |
| Non-Operating Revenues       | -           | -           | -           | -       | -       | -            | -        | -        | -        |
| Non-Operating Expenses       | -           | -           | -           | -       | -       | -            | -        | -        | -        |
| Excess Revenue Over Expenses | (7,700.9)   | 7.1         | (12,242.6)  | -       | (540.3) | 410.7        | -        | -        | -        |

**Schedule RE-R:  
Reconciliation of the Audited  
Financials to Schedule RE**

INSTITUTION NAME: NORTHWEST H

RE - R 3

INSTITUTION NO.: 210040

|                              | Col. 23e | Col. 23f | Col. 23g | Col. 24     | Col. 25   | Col. 26   | Col. 27 |
|------------------------------|----------|----------|----------|-------------|-----------|-----------|---------|
|                              | UR13     | UR14     | UR15     | TOTAL       | TOTAL     | SCHEDULE  | RE      |
|                              | TBD      | TBD      | TBD      | UNREGULATED | REGULATED | RE        | LINE    |
| Gross Patient Revenue        | -        | -        | -        | 63,675.7    | 266,927.6 | 330,603.4 | E       |
| Provision for Bad Debt       | -        | -        | -        | 4,231.3     | 9,479.2   | 13,710.5  | F       |
| Charity Care                 | -        | -        | -        | -           | 2,067.0   | 2,067.0   | G       |
| Contractual Allowances       | -        | -        | -        | 24,204.8    | 28,119.4  | 52,324.2  | H       |
| Total Deductions             | -        | -        | -        | 28,436.2    | 39,665.5  | 68,101.7  | J       |
| Net Patient Revenue          | -        | -        | -        | 35,239.6    | 227,262.1 | 262,501.6 | K       |
| Other Operating Revenue      | -        | -        | -        | 3,336.8     | 4,036.4   | 7,373.2   | L       |
| Total Operating Revenue      | -        | -        | -        | 38,576.4    | 231,298.5 | 269,874.9 | M       |
| <b>Operating Expenses:</b>   |          |          |          |             |           |           |         |
| Salaries, Wages and Benefits | -        | -        | -        | 28,321.1    | 109,108.4 | 137,429.5 | N       |
| Professional Fees            | -        | -        | -        | -           | -         | -         | O       |
| Supplies                     | -        | -        | -        | -           | 49,835.0  | 49,835.0  | P       |
| Depreciation / Amortization  | -        | -        | -        | 567.4       | 13,272.1  | 13,839.4  | Q       |
| Leases / Rentals             | -        | -        | -        | -           | 2,345.2   | 2,345.2   | Q       |
| Interest                     | -        | -        | -        | -           | 4,253.1   | 4,253.1   | R       |
| Other Expenses               | -        | -        | -        | 30,704.1    | 9,784.1   | 40,488.2  | R       |
| Total Operating Expense      | -        | -        | -        | 59,592.6    | 188,597.9 | 248,190.4 | S       |
| Income from Operations       | -        | -        | -        | (21,016.2)  | 42,700.6  | 21,684.4  | T       |
| Non-Operating Revenues       | -        | -        | -        | 6,622.7     | XXXXXX    | 6,622.7   | U       |
| Non-Operating Expenses       | -        | -        | -        | -           | XXXXXX    | -         | V       |
| Excess Revenue Over Expenses | -        | -        | -        | (14,393.5)  | 42,700.6  | 28,307.1  | W       |

OVERHEAD STATISTICAL APPORTIONMENT

JS1 & JS2

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040

FISCAL YEAR 06/30/2018

| UNIT COST CALCULATIONS                       | COL 1         | COL 2                  | COL 3                           | COL 4                   | COL 5                            | COL 6                        | COL 7                             | COL 7 A                            | COL 8                              | COL 9                 | COL 10              |           |
|--|---------------|------------------------|---------------------------------|-------------------------|----------------------------------|------------------------------|-----------------------------------|------------------------------------|------------------------------------|-----------------------|---------------------|-----------|
|  | DIETARY MEALS | LAUNDRY & LINEN POUNDS | PURCHASING STORES OTH EXP SCHED | HOUSEKEEPING # OF HOURS | CENT SUPPLY PHARMACY SOCIAL SERV | PLANT OPERATIONS NET SQ FEET | INPATIENT: PAC, MRD FIS, MGT, NAD | AMBULATORY: PAC, MRD FIS, MGT, NAD | OUTPATIENT: PAC, MRD FIS, MGT, NAD | MED STAFF ADMIN EIPAs | UNASSIGNED EXPENSES |           |
| A Overhead Expenses                          | 2,827.0       | 1,000.9                | 898.2                           | 3,896.9                 | 6,965.1                          | 8,881.1                      | 13,113.5                          | 242.5                              | 12,577.4                           | 2,129.4               | 7,100.0             |           |
| B Units                                      | 183,360       | 1,145,309              | 11,713                          | 160,160                 | 6,965                            | 188,218                      | 53,994.6                          | 998.6                              | 34,028.1                           | 19,424                | 133,373.5           |           |
| C Cost per unit                              | 0.015418      | 0.000874               | 0.068996                        | 0.024332                | 1.000000                         | 0.047185                     | 0.242867                          | 0.242867                           | 0.369617                           | 0.109626              | 0.053234            |           |
| <b>STATISTICAL APPORTIONMENT</b>             |               |                        |                                 |                         |                                  |                              |                                   |                                    |                                    |                       |                     |           |
| 1 Med/Surg Acute                             | MSG           | 136,994                | 529,511                         | 1,851.5                 | 55,810                           | ////////                     | 65,519                            | 24,452.2                           | ////////                           | ////////              | 37,542.9            |           |
| 2 Pediatric Acute                            | PED           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 3 Psychiatric Acute                          | PSY           | 38,864                 | 75,590                          | 251.9                   | 3,355                            | ////////                     | 3,939                             | 6,779.2                            | ////////                           | ////////              | 9,375.8             |           |
| 4 Obstetrics Acute                           | OBS           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 5 Definitive Observation                     | DEF           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 6 Med/Surg Intensive Care                    | MIS           | 7,502                  | 126,227                         | 177.2                   | 5,906                            | ////////                     | 6,933                             | 3,795.1                            | ////////                           | ////////              | 5,425.8             |           |
| 7 Coronary Care                              | CUS           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 8 Pediatric Intensive Care                   | PIC           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 9 Neonatal Intensive Care                    | NEO           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 10 Burn Care                                 | BUR           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 11 Psychiatric Intensive Care                | PSI           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 12 Shock Trauma                              | TRM           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 13 Oncology                                  | ONC           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 14 Newborn Nursery                           | NUR           | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 15 Premature Nursery                         | PRE           | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 16 Chronic Care                              | CRH           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 17 Emergency Services                        | EMG           | 0                      | 97,344                          | 868.7                   | 19,071                           | ////////                     | 22,389                            | 2,179.5                            | ////////                           | 8,030.7               | 1,946               | 15,586.5  |
| 18 Clinical Services                         | CL            | ////////               | 0                               | 393.3                   | 13,626                           | ////////                     | 15,997                            | 245.0                              | ////////                           | 3,492.6               | 914                 | 6,301.7   |
| 19 Psych. Day & Night Care                   | PDC           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 20 Ambulatory Surgery (PBP)                  | AMS           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 21 Same Day Surgery                          | SDS           | 0                      | 0                               | 40.5                    | 4,352                            | ////////                     | 5,109                             | 998.6                              | ////////                           | 2,315                 | 1,844.6             |           |
| 22 Labor & Delivery Services                 | DEL           | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 23 Operating Room                            | OR            | ////////               | 145,482                         | 1,494.1                 | 18,170                           | ////////                     | 21,331                            | 3,135.8                            | ////////                           | 5,961.4               | 13,741.0            |           |
| 24 Operating Room Clinic                     | ORC           | ////////               | 0                               | 29.9                    | 0                                | ////////                     | 196                               | 4.6                                | ////////                           | 486.5                 | 683.3               |           |
| 25 Anesthesiology                            | ANS           | ////////               | 0                               | 788.4                   | 246                              | ////////                     | 289                               | 456.0                              | ////////                           | 857.9                 | 1,815.7             |           |
| 26 Laboratory Services                       | LAB           | ////////               | 0                               | 2,923.2                 | 7,017                            | ////////                     | 8,238                             | 2,776.9                            | ////////                           | 3,141.0               | 8,514.5             |           |
| 27 Electrocardiography                       | EKG           | ////////               | 0                               | 73.6                    | 369                              | ////////                     | 433                               | 107.4                              | ////////                           | 168.7                 | 399.0               |           |
| 28 Interventional Radiology / Cardiovascular | IRC           | ////////               | 0                               | 81.7                    | 2,137                            | ////////                     | 2,509                             | 520.1                              | ////////                           | 515.5                 | 1,528.5             |           |
| 29 Radiology-Diagnostic                      | RAD           | ////////               | 63,114                          | 613.1                   | 12,072                           | ////////                     | 14,172                            | 1,147.0                            | ////////                           | 2,958.9               | 6,538.1             |           |
| 30 CT Scanner                                | CAT           | ////////               | 20,325                          | 311.4                   | 982                              | ////////                     | 1,153                             | 404.7                              | ////////                           | 995.0                 | 1,983.3             |           |
| 31 Radiology-Therapeutic                     | RAT           | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 32 Nuclear Medicine                          | NUC           | ////////               | 33,161                          | 105.1                   | 1,480                            | ////////                     | 1,738                             | 309.1                              | ////////                           | 263.6                 | 899.5               |           |
| 33 Respiratory Therapy                       | RES           | ////////               | 0                               | 341.3                   | 1,239                            | ////////                     | 1,455                             | 2,337.7                            | ////////                           | 423.2                 | 3,607.4             |           |
| 34 Pulmonary Function Testing                | PUL           | ////////               | 0                               | 23.9                    | 223                              | ////////                     | 262                               | 10.1                               | ////////                           | 96.1                  | 163.6               |           |
| 35 Electroencephalography                    | EEG           | ////////               | 25,673                          | 154.1                   | 288                              | ////////                     | 338                               | 163.3                              | ////////                           | 220.7                 | 561.3               |           |
| 36 Physical Therapy                          | PTH           | ////////               | 28,882                          | 53.2                    | 3,601                            | ////////                     | 4,228                             | 750.8                              | ////////                           | 484.4                 | 1,912.6             |           |
| 37 Occupational Therapy                      | OTH           | ////////               | 0                               | 15.2                    | 126                              | ////////                     | 148                               | 221.1                              | ////////                           | 58.6                  | 366.2               |           |
| 38 Speech Language Pathology                 | STH           | ////////               | 0                               | 7.1                     | 0                                | ////////                     | 0                                 | 244.2                              | ////////                           | 42.3                  | 362.0               |           |
| 39 Recreational Therapy                      | REC           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 40 Audiology                                 | AUD           | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 41 Other Physical Medicine                   | OPM           | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 42 Renal Dialysis                            | RDL           | 0                      | 0                               | 732.7                   | 1,222                            | ////////                     | 1,434                             | 742.4                              | ////////                           | ////////              | 1,070.7             |           |
| 43 Organ Acquisition                         | OA            | ////////               | 0                               | 0.0                     | 0                                | 0.0                          | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 44 Ambulatory Surgery                        | AOR           | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 45 Leukopheresis                             | LEU           | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 46 Hyperbaric Chamber                        | HYP           | ////////               | 0                               | 1.9                     | 583                              | ////////                     | 684                               | 0.8                                | ////////                           | 98.5                  | 182.5               |           |
| 47 Free Standing Emergency                   | FSE           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 48 Magnetic Resonance Imaging                | MRI           | ////////               | 0                               | 256.0                   | 1,968                            | ////////                     | 2,310                             | 324.5                              | ////////                           | 388.8                 | 1,110.4             |           |
| 49 Adolescent Dual Diagnosed                 | ADD           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 50 Lithotripsy                               | LIT           | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 51 Rehabilitation                            | RHB           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 52 Observation                               | OBV           | 0                      | 0                               | 124.0                   | 0                                | ////////                     | 0                                 | 194.1                              | ////////                           | 1,966.5               | 3,990               | 3,380.5   |
| 53 Ambulance Services-Rebundled              | AMR           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 54 Transurethral Microwave Thermotherapy     | TMT           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 55 Oncology O/P Clinic                       | OC            | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 56 Transurethral Needle Ablation             | TNA           | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 57 Pediatric Step-Down                       | PSD           | 0                      | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 58 340B Clinic Services                      | CL-340        | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 59 340B Radiology - Therapeutic              | RAT-340       | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 60 340B OR Clinic Services                   | ORC-340       | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 61 340B Laboratory Services                  | LAB-340       | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 62 340B Drugs                                | CDS-340       | ////////               | 0                               | 0.0                     | 0                                | ////////                     | 0                                 | ////////                           | ////////                           | ////////              | 0.0                 |           |
| 63 Admission Services                        | ADM           | ////////               | ////////                        | ////////                | ////////                         | ////////                     | 895.1                             | 0                                  | ////////                           | ////////              | 10,259              | ////////  |
| 64 Med/Surg Supplies                         | MSS           | ////////               | ////////                        | ////////                | 4,108                            | ////////                     | 1,438.7                           | 4,821                              | 854.9                              | 583.8                 | 2,189.6             |           |
| 65 Drugs Sold                                | CDS           | ////////               | ////////                        | ////////                | 2,209                            | ////////                     | 4,631.3                           | 2,593                              | 1,838.0                            | 2,793.3               | 6,286.3             |           |
| E TOTAL                                      |               | 183,360                | 1,145,309                       | 11,713.1                | 160,160                          | 6,965.1                      | 188,218                           | 53,994.6                           | 998.6                              | 34,028.1              | 19,424              | 133,373.5 |

OVERHEAD EXPENSE APPORTIONMENT

J1 & J2

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040

FISCAL YEAR 06/30/2018

|  |               | COL 1                  | COL 2                          | COL 3                   | COL 4                            | COL 5                        | COL 6                       | COL 7                             | COL 8                              | COL 8 A                            | COL 9                 | COL 10              | COL 11               | COL 12                   | COL 13 |
|--|---------------|------------------------|--------------------------------|-------------------------|----------------------------------|------------------------------|-----------------------------|-----------------------------------|------------------------------------|------------------------------------|-----------------------|---------------------|----------------------|--------------------------|--------|
| ALLOCATED CENTERS                            | DIETARY MEALS | LAUNDRY & LINEN POUNDS | PURCHASING STORES OTH EXP SCHD | HOUSEKEEPING # OF HOURS | CENT SUPPLY PHARMACY SOCIAL SERV | PLANT OPERATIONS NET SQ FEET | TOTAL PATIENT CARE OVERHEAD | INPATIENT: PAC, MRD FIS, MGT, NAD | AMBULATORY: PAC, MRD FIS, MGT, NAD | OUTPATIENT: PAC, MRD FIS, MGT, NAD | MED STAFF ADMIN EIPAs | UNASSIGNED EXPENSES | TOTAL OTHER OVERHEAD | TOTAL ALLOCATED OVERHEAD |        |
| A Overhead Expenses                          | 2,827.0       | 1,000.9                | 808.2                          | 3,896.9                 | 6,965.1                          | 8,881.1                      | 24,379.2                    | 13,113.5                          | 242.5                              | 12,577.4                           | 2,129.4               | 7,100.0             | 35,162.8             | 59,542.0                 |        |
| <b>REVENUE CENTERS</b>                       |               |                        |                                |                         |                                  |                              |                             |                                   |                                    |                                    |                       |                     |                      |                          |        |
| 1 Med/Surg Acute                             | MSG           | 2,112.2                | 462.8                          | 127.7                   | 1,357.9                          | 3,091.5                      | 7,152.1                     | 5,938.6                           |                                    |                                    |                       | 1,998.6             | 7,937.2              | 15,089.3                 |        |
| 2 Pediatric Acute                            | PED           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 3 Psychiatric Acute                          | PSY           | 599.2                  | 66.1                           | 17.4                    | 81.6                             | 185.9                        | 950.1                       | 1,646.5                           |                                    |                                    |                       | 499.1               | 2,145.6              | 3,095.7                  |        |
| 4 Obstetrics Acute                           | OBS           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 5 Definitive Observation                     | DEF           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 6 Med/Surg Intensive Care                    | MIS           | 115.7                  | 110.3                          | 12.2                    | 143.7                            | 327.1                        | 709.0                       | 921.7                             |                                    |                                    |                       | 288.8               | 1,210.5              | 1,919.6                  |        |
| 7 Coronary Care                              | CCU           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 8 Pediatric Intensive Care                   | PIC           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 9 Neonatal Intensive Care                    | NEO           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 10 Burn Care                                 | BUR           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 11 Psychiatric Intensive Care                | PSI           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 12 Shock/Trauma                              | TRM           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 13 Oncology                                  | ONC           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 14 Newborn Nursery                           | NUR           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 15 Premature Nursery                         | PRE           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 16 Chronic Care                              | CRH           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 17 Emergency Services                        | EMG           |                        | 85.1                           | 59.9                    | 464.0                            | 1,056.4                      | 1,665.5                     | 529.3                             |                                    | 2,968.3                            | 213.3                 | 829.7               | 4,540.7              | 6,206.1                  |        |
| 18 Clinical Services                         | CL            |                        |                                | 27.1                    | 331.5                            | 754.8                        | 1,113.5                     | 59.5                              |                                    | 1,290.9                            | 100.2                 | 335.5               | 1,786.1              | 2,899.6                  |        |
| 19 Psych. Day & Night Care                   | PDC           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 20 Ambulatory Surgery (PBP)                  | AMS           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 21 Same Day Surgery                          | SDS           |                        |                                | 2.8                     | 105.9                            | 241.1                        | 349.8                       |                                   | 242.5                              |                                    | 253.7                 | 98.2                | 594.4                | 944.2                    |        |
| 22 Labor & Delivery Services                 | DEL           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 23 Operating Room                            | OR            |                        | 127.1                          | 103.1                   | 442.1                            | 1,006.5                      | 1,678.8                     | 761.6                             |                                    | 2,203.4                            |                       | 731.5               | 3,696.5              | 5,375.3                  |        |
| 24 Operating Room Clinic                     | ORC           |                        |                                | 2.1                     |                                  | 9.2                          | 11.3                        | 1.1                               |                                    | 179.8                              |                       | 36.4                | 217.3                | 228.6                    |        |
| 25 Anesthesiology                            | ANS           |                        |                                | 54.4                    | 6.0                              | 13.6                         | 74.0                        | 110.7                             |                                    | 317.1                              |                       | 96.7                | 524.5                | 598.5                    |        |
| 26 Laboratory Services                       | LAB           |                        |                                | 201.7                   | 170.7                            | 388.7                        | 761.1                       | 674.4                             |                                    | 1,161.0                            |                       | 453.3               | 2,288.7              | 3,049.8                  |        |
| 27 Electrocardiography                       | EKG           |                        |                                | 5.1                     | 9.0                              | 20.4                         | 34.5                        | 62.3                              |                                    | 62.3                               |                       | 21.2                | 109.7                | 144.2                    |        |
| 28 Interventional Radiology / Cardiovascular | IRC           |                        |                                | 5.6                     | 52.0                             | 118.4                        | 176.0                       | 126.3                             |                                    | 190.5                              |                       | 81.4                | 398.2                | 574.2                    |        |
| 29 Radiology-Diagnostic                      | RAD           |                        |                                | 55.2                    | 42.3                             | 293.7                        | 668.7                       | 1,093.7                           |                                    | 1,093.7                            |                       | 348.0               | 1,720.3              | 2,780.2                  |        |
| 30 CT Scanner                                | CAT           |                        |                                | 17.8                    | 21.5                             | 23.9                         | 54.4                        | 117.5                             |                                    | 98.3                               |                       | 367.8               | 105.6                | 689.2                    |        |
| 31 Radiology-Therapeutic                     | RAT           |                        |                                |                         |                                  |                              |                             | 0.0                               |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 32 Nuclear Medicine                          | NUC           |                        | 29.0                           | 7.3                     | 36.0                             | 82.0                         | 154.3                       | 75.1                              |                                    | 97.4                               |                       | 47.9                | 220.4                | 374.7                    |        |
| 33 Respiratory Therapy                       | RES           |                        |                                | 23.6                    | 30.1                             | 68.7                         | 122.4                       | 567.8                             |                                    | 156.4                              |                       | 192.0               | 916.2                | 1,038.5                  |        |
| 34 Pulmonary Function Testing                | PUL           |                        |                                | 1.6                     | 5.4                              | 12.4                         | 19.4                        | 2.5                               |                                    | 35.5                               |                       | 8.7                 | 46.7                 | 66.1                     |        |
| 35 Electroencephalography                    | EEG           |                        | 22.4                           | 10.6                    | 7.0                              | 15.9                         | 56.0                        | 39.7                              |                                    | 81.6                               |                       | 29.9                | 151.1                | 207.1                    |        |
| 36 Physical Therapy                          | PTH           |                        | 25.2                           | 3.7                     | 87.6                             | 199.5                        | 316.0                       | 182.3                             |                                    | 179.0                              |                       | 101.8               | 463.2                | 779.2                    |        |
| 37 Occupational Therapy                      | OTH           |                        |                                | 1.0                     | 3.1                              | 7.0                          | 11.1                        | 53.7                              |                                    | 21.7                               |                       | 19.5                | 94.9                 | 106.0                    |        |
| 38 Speech Language Pathology                 | STH           |                        |                                | 0.5                     |                                  |                              | 0.5                         | 59.3                              |                                    | 15.7                               |                       | 19.3                | 94.2                 | 94.7                     |        |
| 39 Recreational Therapy                      | REC           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 40 Audiology                                 | AUD           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 41 Other Physical Medicine                   | OPM           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 42 Renal Dialysis                            | RDL           |                        |                                | 50.6                    | 29.7                             | 67.7                         | 148.0                       | 180.3                             |                                    |                                    |                       | 57.0                | 237.3                | 385.3                    |        |
| 43 Organ Acquisition                         | OA            |                        |                                |                         |                                  | 0.0                          | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 44 Ambulatory Surgery                        | AOR           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 45 Leukopheresis                             | LEU           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 46 Hyperbaric Chamber                        | HYP           |                        |                                | 0.1                     | 14.2                             | 32.3                         | 46.6                        | 0.2                               |                                    | 36.4                               |                       | 9.7                 | 46.3                 | 92.9                     |        |
| 47 Free Standing Emergency                   | FSE           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 48 Magnetic Resonance Imaging                | MRI           |                        |                                | 17.7                    | 47.9                             | 109.0                        | 174.5                       | 78.8                              |                                    | 143.7                              |                       | 59.1                | 281.6                | 456.2                    |        |
| 49 Adolescent Dual Diagnosed                 | ADD           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 50 Lithotripsy                               | LIT           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 51 Rehabilitation                            | RHB           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 52 Observation                               | OBV           |                        |                                | 8.6                     |                                  |                              | 8.6                         | 47.1                              |                                    | 726.8                              | 437.4                 | 180.0               | 1,391.4              | 1,399.9                  |        |
| 53 Ambulance Services-Rebundled              | AMR           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 54 Transurethral Microwave Thermotherapy     | TMT           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 55 Oncology O/P Clinic                       | OCL           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 56 Transurethral Needle Ablation             | TNA           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 57 Pediatric Step-Down                       | PSD           |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 58 340B Clinic Services                      | CL-340        |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 59 340B Radiology - Therapeutic              | RAT-340       |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 60 340B OR Clinic Services                   | ORC-340       |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 61 340B Laboratory Services                  | LAB-340       |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 62 340B Drugs                                | CDS-340       |                        |                                |                         |                                  |                              | 0.0                         |                                   |                                    |                                    |                       |                     |                      | 0.0                      |        |
| 63 Admission Services                        | ADM           |                        |                                |                         |                                  | 895.1                        | 895.1                       |                                   |                                    |                                    | 1,124.7               |                     | 1,124.7              | 2,019.7                  |        |
| 64 Med/Surg Supplies                         | MSS           |                        |                                |                         | 100.0                            | 1,438.7                      | 1,766.1                     | 227.5                             | 207.6                              | 215.8                              |                       | 116.6               | 540.0                | 2,306.1                  |        |
| 65 Drugs Sold                                | CDS           |                        |                                |                         | 53.7                             | 4,631.3                      | 122.4                       | 4,807.4                           | 446.4                              | 1,032.5                            |                       | 334.6               | 1,813.5              | 6,620.9                  |        |
| E TOTAL                                      | 2,827.0       | 1,000.9                | 808.2                          | 3,896.9                 | 6,965.1                          | 8,881.1                      | 24,379.2                    | 13,113.5                          | 242.5                              | 12,577.4                           | 2,129.4               | 7,100.0             | 35,162.8             | 59,542.0                 |        |

DEPARTMENTAL EQUIPMENT ALLOWANCE

H2

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR

06/30/2018

INSTITUTION NUMBER: 210040

|      |        | COL 1                          | COL 2 | COL 3                           | COL 4                         | COL 5                            | COL 6                         | COL 7                                  | COL 8                                |
|------|--------|--------------------------------|-------|---------------------------------|-------------------------------|----------------------------------|-------------------------------|--|--------------------------------------|
|      | CENTER | COST<br>BASE YEAR<br>PURCHASES | # YRS | CUMULATIVE<br>PURCHASE<br>TOTAL | DEPRECIATION<br>COL 3 / COL 2 | MKT VALUE<br>BASE YEAR<br>LEASES | CUMULATIVE<br>LEASES<br>TOTAL | LEASE<br>AMORTIZATION<br>COL 6 / COL 2 | DEPR/AMORT<br>TOTAL<br>COL 4 + COL 7 |
| H2A  | MIS    | 33.1                           | 10    | 615.6                           | 61.6                          | 0.0                              | 0.0                           | 0.0                                    | 61.6                                 |
| H2B  | CCU    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2C  | PIC    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2D  | NEO    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2E  | BUR    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2F  | TRM    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2G  | ONC    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2H  | OR     | 3,827.9                        | 10    | 13,662.4                        | 1,366.2                       | 0.0                              | 0.0                           | 0.0                                    | 1,366.2                              |
| H2I  | ORC    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2J  | AOR    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2K  | LAB    | 100.7                          | 10    | 1,035.0                         | 103.5                         | 0.0                              | 0.0                           | 0.0                                    | 103.5                                |
| H2L  | IRC    | 0.0                            | 10    | 80.4                            | 8.0                           | 0.0                              | 0.0                           | 0.0                                    | 8.0                                  |
| H2M  | RAD    | 284.3                          | 10    | 3,584.0                         | 358.4                         | 0.0                              | 0.0                           | 0.0                                    | 358.4                                |
| H2N  | CAT    | 0.0                            | 6.5   | 692.5                           | 106.5                         | 0.0                              | 0.0                           | 0.0                                    | 106.5                                |
| H2O  | RAT    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2P  | NUC    | 0.0                            | 10    | 364.2                           | 36.4                          | 0.0                              | 0.0                           | 0.0                                    | 36.4                                 |
| H2Q  | RDL    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2R  | HYP    | 0.0                            | 10    | 275.5                           | 27.5                          | 0.0                              | 0.0                           | 0.0                                    | 27.5                                 |
| H2S  | DTY    | 8.5                            | 10    | 279.8                           | 28.0                          | 0.0                              | 0.0                           | 0.0                                    | 28.0                                 |
| H2T  | LL     | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2U  | MGT    | 0.0                            | 10    | 1,977.4                         | 197.7                         | 0.0                              | 0.0                           | 0.0                                    | 197.7                                |
| H2V  | EDP    | 0.0                            | 10    | 65.3                            | 6.5                           | 0.0                              | 0.0                           | 0.0                                    | 6.5                                  |
| H2W  | MRI    | 0.0                            | 6     | 2,187.2                         | 364.5                         | 0.0                              | 0.0                           | 0.0                                    | 364.5                                |
| H2X  | LIT    | 0.0                            | 5     | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2Y  | ETH    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2Z  | TRP    | 0.0                            | 5     | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2AA | TMT    | 0.0                            | 5     | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
|      | TOTAL  | 4,254.4                        |       | 24,819.2                        | 2,665.0                       | 0.0                              | 0.0                           | 0.0                                    | 2,665.0                              |

DISTRIBUTION OF CAPITAL FACILITIES ALLOWANCE

H3 A

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR

06/30/2018

INSTITUTION NUMBER: 210040

| ALLOWANCE                      | Col. 1   | Col. 2   | Col. 3     | Col. 4     | Col. 5     | Col. 6     | Col. 7     | Col. 8     |   |
|--------------------------------|----------|----------|------------|------------|------------|------------|------------|------------|---|
|                                | SOURCE   | GENERAL  | DIETARY    | LAUNDRY    | COMM.      | DATA PROC  | DEPART     | TOTAL      |   |
| A INTEREST                     | RECORDS  | 4,245    | ////////// | ////////// | ////////// | ////////// | ////////// | ////////// | A |
| B TOTAL DEPRECIATION           | RECORDS  | 15,617.3 | ////////// | ////////// | ////////// | ////////// | ////////// | ////////// | B |
| C CAPITAL INTENSIVE EQUIP DEPR | TOTAL H2 | 2,665.0  | 28.0       | 0.0        | 197.7      | 6.5        | 2,432.8    | 5,330.0    | C |
| D BLDG & GEN EQUIP DEPR        | B - C    | 12,952.3 | ////////// | ////////// | ////////// | ////////// | ////////// | 12,952.3   | D |
| E BLDG & GEN EQUIP DEPR & INT  | A + D    | 17,197.7 | 28.0       | 0.0        | 197.7      | 6.5        | 2,432.8    | 19,862.7   | E |
| F STANDARD UNITS               | //////   | 206,188  | 183,360    | 1,145,309  | 89,021     | 89,021     | ////////// | ////////// | F |
| G ALLOWANCE PER UNIT           | E / F    | 0.08341  | 0.00015    | 0.00000    | 0.00222    | 0.00007    | ////////// | ////////// | G |

| DISTRIBUTION                                 | CODE | ADJ. SQUARE FOOTAGE BASIS |         |            |            |      |     |            |         |    |
|--|------|---------------------------|---------|------------|------------|------|-----|------------|---------|----|
| 1 Med/Surg Acute                             | MSG  | 73,002                    | 6,089.0 | 20.9       | 0.0        | 54.3 | 1.8 | ////////// | 6,166.0 | 1  |
| 2 Pediatric Acute                            | PED  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | ////////// | 0.0     | 2  |
| 3 Psychiatric Acute                          | PSY  | 4,387                     | 365.9   | 5.9        | 0.0        | 15.1 | 0.5 | ////////// | 387.4   | 3  |
| 4 Obstetrics Acute                           | OBS  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | ////////// | 0.0     | 4  |
| 5 Definitive Observation                     | DEF  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | ////////// | 0.0     | 5  |
| 6 Med/Surg Intensive Care                    | MIS  | 7,719                     | 643.8   | 1.1        | 0.0        | 8.4  | 0.3 | 61.6       | 715.2   | 6  |
| 7 Coronary Care                              | CCU  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | 0.0        | 0.0     | 7  |
| 8 Pediatric Intensive Care                   | PIC  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | 0.0        | 0.0     | 8  |
| 9 Neonatal Intensive Care                    | NEO  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | 0.0        | 0.0     | 9  |
| 10 Burn Care                                 | BUR  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | 0.0        | 0.0     | 10 |
| 11 Psychiatric Intensive Care                | PSI  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | ////////// | 0.0     | 11 |
| 12 Shock Trauma                              | TRM  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | 0.0        | 0.0     | 12 |
| 13 Oncology                                  | ONC  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | 0.0        | 0.0     | 13 |
| 14 Newborn Nursery                           | NUR  | 0                         | 0.0     | ////////// | 0.0        | 0.0  | 0.0 | ////////// | 0.0     | 14 |
| 15 Premature Nursery                         | PRE  | 0                         | 0.0     | ////////// | 0.0        | 0.0  | 0.0 | ////////// | 0.0     | 15 |
| 16 Chronic Care                              | CRH  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | ////////// | 0.0     | 16 |
| 17 Emergency Services                        | EMG  | 22,700                    | 1,893.4 | 0.0        | 0.0        | 22.7 | 0.8 | ////////// | 1,916.8 | 17 |
| 18 Clinical Services                         | CL   | 16,965                    | 1,415.0 | ////////// | 0.0        | 8.3  | 0.3 | ////////// | 1,423.6 | 18 |
| 19 Psych. Day & Night Care                   | PDC  | 0                         | 0.0     | 0.0        | 0.0        | 0.0  | 0.0 | ////////// | 0.0     | 19 |
| 20 Same Day Surgery                          | SDS  | 5,109                     | 426.1   | 0.0        | 0.0        | 2.2  | 0.1 | ////////// | 428.4   | 20 |
| 21 Labor & Delivery Services                 | DEL  | 0                         | 0.0     | ////////// | 0.0        | 0.0  | 0.0 | ////////// | 0.0     | 21 |
| 22 Operating Room                            | OR   | 23,749                    | 1,980.9 | ////////// | 0.0        | 20.2 | 0.7 | 1,366.2    | 3,368.0 | 22 |
| 23 Operating Room Clinic                     | ORC  | 196                       | 16.4    | ////////// | 0.0        | 1.1  | 0.0 | ////////// | 17.5    | 23 |
| 24 Anesthesiology                            | ANS  | 333                       | 27.8    | ////////// | 0.0        | 2.9  | 0.1 | ////////// | 30.8    | 24 |
| 25 Med/Surg Supplies                         | MSS  | 5,367                     | 447.7   | ////////// | ////////// | 3.2  | 0.1 | ////////// | 451.0   | 25 |
| 26 Drugs Sold                                | CDS  | 3,161                     | 263.7   | ////////// | ////////// | 10.3 | 0.3 | ////////// | 274.3   | 26 |
| 27 Laboratory Services                       | LAB  | 9,172                     | 765.0   | ////////// | 0.0        | 13.2 | 0.4 | 103.5      | 882.1   | 27 |
| 28 Electrocardiography                       | EKG  | 483                       | 40.3    | ////////// | 0.0        | 0.6  | 0.0 | ////////// | 40.9    | 28 |
| 29 Interventional Radiology / Cardiovascular | IRC  | 2,794                     | 233.0   | ////////// | 0.0        | 2.3  | 0.1 | 8.0        | 243.5   | 29 |
| 30 Radiology-Diagnostic                      | RAD  | 15,857                    | 1,322.6 | ////////// | 0.0        | 9.1  | 0.3 | 358.4      | 1,690.4 | 30 |
| 31 CT Scanner                                | CAT  | 1,264                     | 105.4   | ////////// | 0.0        | 3.1  | 0.1 | 106.5      | 215.2   | 31 |
| 32 Radiology-Therapeutic                     | RAT  | 0                         | 0.0     | ////////// | 0.0        | 0.0  | 0.0 | 0.0        | 0.0     | 32 |
| 33 Nuclear Medicine                          | NUC  | 1,935                     | 161.4   | ////////// | 0.0        | 1.3  | 0.0 | 36.4       | 199.1   | 33 |

DISTRIBUTION OF CAPITAL FACILITIES ALLOWANCE

H3 B

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018  
 INSTITUTION NUMBER: 210040

| DISTRIBUTION |                                       | Col. 1<br>ADJ. SQUARE<br>FOOTAGE<br>BASIS | Col. 2<br>GENERAL | Col. 3<br>DIETARY | Col. 4<br>LAUNDRY | Col. 5<br>COMM. | Col. 6<br>DATA PROC | Col. 7<br>DEPART | Col. 8<br>TOTAL |        |    |
|--------------|---------------------------------------|---|-------------------|-------------------|-------------------|-----------------|---------------------|------------------|-----------------|--------|----|
|              |                                       |   |                   |                   |                   |                 |                     |                  |                 |        |    |
| 34           | Respiratory Therapy                   | RES                                       | 1,620             | 135.1             | //////////        | 0.0             | 6.1                 | 0.2              | //////////      | 141.5  | 34 |
| 35           | Pulmonary Function Testing            | PUL                                       | 292               | 24.4              | //////////        | 0.0             | 0.2                 | 0.0              | //////////      | 24.6   | 35 |
| 36           | Electroencephalography                | EEG                                       | 377               | 31.4              | //////////        | 0.0             | 0.9                 | 0.0              | //////////      | 32.3   | 36 |
| 37           | Physical Therapy                      | PTH                                       | 4,707             | 392.6             | //////////        | 0.0             | 2.7                 | 0.1              | //////////      | 395.4  | 37 |
| 38           | Occupational Therapy                  | OTH                                       | 148               | 12.3              | //////////        | 0.0             | 0.6                 | 0.0              | //////////      | 13.0   | 38 |
| 39           | Speech Language Pathology             | STH                                       | 0                 | 0.0               | //////////        | 0.0             | 0.6                 | 0.0              | //////////      | 0.7    | 39 |
| 40           | Recreational Therapy                  | REC                                       | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 40 |
| 41           | Audiology                             | AUD                                       | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 41 |
| 42           | Other Physical Medicine               | OPM                                       | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 42 |
| 43           | Renal Dialysis                        | RDL                                       | 1,596             | 133.1             | //////////        | 0.0             | 1.7                 | 0.1              | 0.0             | 134.8  | 43 |
| 44           | Organ Acquisition                     | OA  | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 44 |
| 45           | Leukopheresis                         | LEU                                       | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 45 |
| 46           | Hyperbaric Chamber                    | HYP                                       | 684               | 57.1              | //////////        | 0.0             | 0.2                 | 0.0              | 27.5            | 84.8   | 46 |
| 47           | Free Standing Emergency               | FSE                                       | 0                 | 0.0               | 0.0               | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 47 |
| 48           | Magnetic Resonance Imaging            | MRI                                       | 2,571             | 214.4             | //////////        | 0.0             | 1.6                 | 0.1              | 364.5           | 580.6  | 48 |
| 49           | Lithotripsy                           | LIT                                       | 0                 | 0.0               | //////////        | //////////      | 0.0                 | 0.0              | 0.0             | 0.0    | 49 |
| 50           | Rehabilitation                        | RHB                                       | 0                 | 0.0               | 0.0               | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 50 |
| 51           | Observation                           | OBV                                       | 0                 | 0.0               | //////////        | 0.0             | 4.8                 | 0.2              | //////////      | 5.0    | 51 |
| 52           | Transurethral Microwave Thermotherapy | TMT                                       | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | 0.0             | 0.0    | 52 |
| 53           | Oncology O/P Clinic                   | OCL                                       | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 53 |
| 54           | Transurethral Needle Ablation         | TNA                                       | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 54 |
| 55           | Pediatric Step-Down                   | PSD                                       | 0                 | 0.0               | 0.0               | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 55 |
| 56           | 340B Clinic Services                  | CL-340                                    | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 56 |
| 57           | 340B Radiology - Therapeutic          | RAT-340                                   | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 57 |
| 58           | 340B OR Clinic Services               | ORC-340                                   | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 58 |
| 59           | 340B Laboratory Services              | LAB-340                                   | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 59 |
| 60           | 340B Drugs                            | CDS-340                                   | 0                 | 0.0               | //////////        | 0.0             | 0.0                 | 0.0              | //////////      | 0.0    | 60 |
| 1            | Subtotal                              | ABC                                       | 206,188           | 17,198            | 28                | 0               | 198                 | 7                | 2,433           | 19,863 | 1  |
| 61           | Ambulance Services                    | AMB                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 61 |
| 62           | Parking                               | PAR                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 62 |
| 63           | Doctor's Private Office Rent          | DPO                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 63 |
| 64           | Office & Other Rental                 | OOR                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 64 |
| 65           | Retail Operations                     | REO                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 65 |
| 66           | Patients Telephones                   | PTE                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 66 |
| 67           | Cafeteria                             | CAF                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 67 |
| 68           | Day Care Recreation Areas             | DEB                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 68 |
| 69           | Housing                               | HOU                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 69 |
| 70           | Research                              | REG                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 70 |
| 71           | Nursing Education                     | RNS                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 71 |
| 72           | Other Health Profession Education     | OHE                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 72 |
| 73           | Community Health Education            | CHE                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 73 |
| 74           | Post Graduate Medical Ed              | PME                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 74 |
| 75           | Freestanding Clinic Services          | FSC1                                      | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 75 |
| 76           | Home Health Services                  | HHC                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 76 |
| 77           | Outpatient Renal Dialysis             | ORD                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 77 |
| 78           | Skilled Nursing Care                  | ECF                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 78 |
| 79           | Laboratory Non-Patient                | ULB                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 79 |
| 80           | Physicians Part B Services            | UPB                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 80 |
| 81           | Certified Nurse Anesthetists          | CNA                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 81 |
| 82           | Physician Support Services            | PSS                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 82 |
| 83           | Hospice Care                          | UR9                                       | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 83 |
| 84           | TBD                                   | TBA3                                      | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 84 |
| 85           | TBD                                   | TBA4                                      | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 85 |
| 86           | TBD                                   | TBA5                                      | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 86 |
| 87           | TBD                                   | TBA6                                      | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 87 |
| 88           | TBD                                   | TBA7                                      | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 88 |
| 89           | TBD                                   | TBA8                                      | 0                 | 0.0               | //////////        | //////////      | //////////          | //////////       | //////////      | 0.0    | 89 |



|    |                   |     |         |        |    |   |     |   |       |        |    |
|----|-------------------|-----|---------|--------|----|---|-----|---|-------|--------|----|
| II | TOTAL DISTRIBUTED | XYZ | 206,188 | 17,198 | 28 | 0 | 198 | 7 | 2,433 | 19,863 | II |
|----|-------------------|-----|---------|--------|----|---|-----|---|-------|--------|----|

**OTHER FINANCIAL CONSIDERATIONS**

**G**

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|                               |   | SOURCE      | FISCAL YEAR |          |            |   |
|-------------------------------|---|-------------|-------------|----------|------------|---|
|                               |   |             | TOTAL       | DIRECT   | Difference |   |
| <b>REVENUES</b>               |   |             | COL. 1      | COL. 2   | COL. 3     |   |
| A                             | Donations, Pledges                      | SCH. GR     | 0.0         | 0.0      | 0.0        | A |
| B                             | Grants                                  | SCH. GR     | 0.0         | 0.0      | 0.0        | B |
| C                             | Investment Income (Interest, Dividends) | SCH. GR     | 0.0         | 0.0      | 0.0        | C |
| D                             | Donated Commodities, Blood, Services    | SCH. GR     | 0.0         | 0.0      | 0.0        | D |
| E                             | PSRO                                    | SCH. GR     | 0.0         | 0.0      | 0.0        | E |
| F                             | Other                                   | SCH. GR     | 0.0         | 0.0      | 0.0        | F |
| G                             | Total Revenues                          | A+B+C+D+E+F | 0.0         | 0.0      | 0.0        | G |
| <b>EXPENSES</b>               |   |             |             |          |            |   |
| H                             | Licenses and Taxes                      | SCH. UA     | 457.4       |          | 457.4      | H |
| I                             | Short Term Interest                     | SCH. UA     | 0.0         |          | 0.0        | I |
| J                             | Other                                   | REC/BUDGET  |             |          |            | J |
| K                             | Total Expenses                          | H + I + J   | 457.4       | 0.0      | 457.4      | K |
| <b>OTHER ADJUSTMENTS</b>      |   |             |             |          |            |   |
| L                             | Aux. Ent & OIP Gains                    | SCH. E, F   | (742.6)     | 0.0      | (742.6)    | L |
| M                             | Aux. Ent & OIP Losses                   | SCH. E, F   | 1,692.9     |          | 1,692.9    | M |
| N                             | Excess Cash Requirements - Bldg & Equip | N/A         |             |          |            | N |
| O                             | Gain on Disposal of Assets              | REC/BUDGET  | 0.0         | 0.0      | 0.0        | O |
| P                             | Loss on Disposal of Assets              | REC/BUDGET  | 0.0         |          | 0.0        | P |
| Q                             | Total Other Adjustments                 | L+M+N+O+P   | 950.3       | 0.0      | 950.3      | Q |
| <b>PERCENTAGE CALCULATION</b> |   |             |             |          |            |   |
| R                             | Net Other Financial Considerations      | G + K + Q   | 1,407.7     | 0.0      | 1,407.7    | R |
| S                             | Other Financial Consideration Percent   | R/SCH. M    | ////////    | //////// | 0.7%       | S |

**THIRD PARTY DIFFERENTIAL**

**PDA**

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018  
 INSTITUTION NUMBER: 210040

| SOURCE | INPATIENT | OUTPATIENT | TOTAL |
|--------|-----------|------------|-------|
|--------|-----------|------------|-------|

**CHARGES, DEDUCTIBLES, CBA**

COL 1                  COL 2                  COL 3

|    |  |                | COL 1      | COL 2      | COL 3     |    |
|----|--|----------------|------------|------------|-----------|----|
| A  | Gross Patient Revenue, HSCRC Regulated                   | Records/Budget | 140,980.0  | 125,947.6  | 266,927.6 | A  |
| B  | Medicare Revenue, HSCRC Regulated                        | Records/Budget | 74,851.4   | 40,538.7   | 115,390.1 | B  |
| C  | Medicaid Revenue, HSCRC Regulated                        | Records/Budget | 6,355.7    | 2,056.1    | 8,411.8   | C  |
| D  | Blue Cross Revenue, HSCRC Regulated                      | Records/Budget | 11,096.1   | 15,525.8   | 26,621.9  | D  |
| E  | MCO Subcontracted Medicare, Medicaid, HSCRC Regulated ** | Records/Budget | 24,820.1   | 24,627.5   | 49,447.6  | E  |
| F  | Medicare Deductibles Paid by Medicaid, HSCRC Regulated   | Records/Budget | ////////// | ////////// | 0.0       | F  |
| G  | Uncompensated Care, HSCRC Regulated ***                  | Records/Budget | 6,048.1    | 5,498.1    | 11,546.2  | G  |
| G1 | Other Payors Not Eligible for SAAC & Not U.C.            | A-B-C-D-E-G    | 17,808.5   | 37,701.4   | 55,509.9  | G1 |

**RATIOS, LEVEL III COSTS**

|    |  |                        |            |            |            |    |
|----|--|------------------------|------------|------------|------------|----|
| H  | Ratio of Medicare & Medicaid Charges   | Col 3 (B + C) /Col 3 A | ////////// | ////////// | 0.4638     | H  |
| I  | Ratio of Blue Cross Inpatient Charges  | Col 1 D/Col 3 A        | 0.0416     | ////////// | ////////// | I  |
| II | Ratio of Blue Cross Outpatient Charges | Col 2 D/Col 3 A        | ////////// | 0.0582     | ////////// | II |
| J  | Ratio of HMO Charges                   | Col 3 E/Col 3 A        | ////////// | ////////// | 0.1852     | J  |
| K  | Ratio of Deductibles Paid by Medicaid  | Col 3 F/Col 3 A        | ////////// | ////////// | 0.0000     | K  |
| L  | Ratio of Uncompensated Accounts        | Col 3 G/Col 3 A        | ////////// | ////////// | 0.0433     | L  |
| M  | Ratio of Other Payors Charges          | Col 3 G1/Col 3 A       | ////////// | ////////// | 0.2080     | M  |
| N  | Level III Costs                        | Schedule MA            | ////////// | ////////// | 188,140.6  | N  |

**DIFFERENTIAL CALCULATION**

|   |                               |                 |            |            |           |   |
|---|-------------------------------|-----------------|------------|------------|-----------|---|
| O | Gross Revenue HSCRC Regulated | *               | ////////// | ////////// | 206,397.9 | O |
| P | Payor Differential            | 1 - (Col 3 O/N) | ////////// | ////////// | 0.0970    | P |

\* O = N/ (1-.06H + .0225I + .02II+ .06J + .02K + L+.02M) - per HSCRC

\*\* Detail on Supplemental Schedule 5

\*\*\* See Supplemental Schedule 4 for reconciliation to financial statements

REVENUE CENTER RATE SUMMARY

INSTITUTION NAME: NORTHWEST HOSPITAL  
 INSTITUTION NUMBER: 210040

FISCAL YEAR 06/30/2018

| DESCRIPTION | CODE                                      | COL 1   | COL 2      | COL 3     | COL 4    | COL 5    | COL 6   | COL 7   | COL 8   | COL 9     | COL 10   | COL 11  | LEVEL II  | ----- C F A ----- |                 |
|-------------|---|---------|------------|-----------|----------|----------|---------|---------|---------|-----------|----------|---------|-----------|-------------------|-----------------|
|             |   |         |            |           |          |          |         |         |         |           |          |         |           | UNITS OF MEASURE  | DIRECT EXPENSES |
| 1           | Med/Surg Acute                            | MSG     | 37,798     | 24,452.2  | 7,152.1  | 7,937.2  | /////// | 43.2    | 0.0     | 39,584.7  | 6,145.1  | 20.9    | 45,750.7  |                   |                 |
| 2           | Pediatric Acute                           | PED     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 3           | Psychiatric Acute                         | PSY     | 10,723     | 6,779.2   | 950.1    | 2,145.6  | /////// | 0.0     | 0.0     | 9,875.0   | 381.5    | 5.9     | 10,262.4  |                   |                 |
| 4           | Obstetrics Acute                          | OBS     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 5           | Definitive Observation                    | DEF     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 6           | Med/Surg Intensive Care                   | MIS     | 2,070      | 3,795.1   | 709.0    | 1,210.5  | /////// | 105.8   | 0.0     | 5,820.5   | 652.5    | 62.7    | 6,535.7   |                   |                 |
| 7           | Coronary Care                             | CCU     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 8           | Pediatric Intensive Care                  | PIC     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 9           | Neonatal Intensive Care                   | NEO     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 10          | Burn Care                                 | BUR     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 11          | Shock Trauma                              | TRM     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 12          | Oncology                                  | ONC     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 13          | Newborn Nursery                           | NUR     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 14          | Premature Nursery                         | PRE     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 15          | Chronic Care                              | CRH     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 16          | Emergency Services                        | EMG     | 604,196    | 10,210.1  | 1,665.5  | 4,540.7  | /////// | 0.0     | 0.0     | 16,416.3  | 1,916.8  | 0.0     | 18,333.1  |                   |                 |
| 17          | Clinical Services                         | CL      | 182,777    | 3,737.6   | 1,113.5  | 1,786.1  | /////// | 0.0     | 0.0     | 6,637.2   | 1,423.6  | 0.0     | 8,060.8   |                   |                 |
| 18          | Psych. Day & Night Care                   | PDC     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 19          | Same Day Surgery                          | SDS     | 4,629      | 998.6     | 349.8    | 594.4    | /////// | 0.0     | 0.0     | 1,942.8   | 428.4    | 0.0     | 2,371.2   |                   |                 |
| 20          | Labor & Delivery Services                 | DEL     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 21          | Operating Room                            | OR      | 731,015    | 9,097.2   | 1,678.8  | 3,696.5  | /////// | 82.3    | 0.0     | 14,554.8  | 2,001.7  | 1,366.2 | 17,922.8  |                   |                 |
| 22          | Operating Room Clinic                     | ORC     | 137,237    | 491.1     | 11.3     | 217.3    | /////// | 0.0     | 0.0     | 719.7     | 17.5     | 0.0     | 737.2     |                   |                 |
| 23          | Anesthesiology                            | ANS     | 725,092    | 1,313.9   | 74.0     | 524.5    | /////// | 0.0     | 0.0     | 1,912.4   | 30.8     | 0.0     | 1,943.2   |                   |                 |
| 24          | Laboratory Services                       | LAB     | 8,235,268  | 5,917.9   | 761.1    | 2,288.7  | /////// | 0.0     | 0.0     | 8,967.7   | 778.6    | 103.5   | 9,849.8   |                   |                 |
| 25          | Electrocardiography                       | EKG     | 273,272    | 276.1     | 34.5     | 109.7    | /////// | 0.0     | 0.0     | 420.3     | 40.9     | 0.0     | 461.2     |                   |                 |
| 26          | Interventional Radiology / Cardiovascular | IRC     | 50,593     | 1,035.6   | 176.0    | 398.2    | /////// | 0.0     | 0.0     | 1,609.8   | 235.4    | 8.0     | 1,853.3   |                   |                 |
| 27          | Radiology-Diagnostic                      | RAD     | 716,858    | 4,106.0   | 1,059.9  | 1,720.3  | /////// | 0.0     | 0.0     | 6,886.2   | 1,332.0  | 358.4   | 8,576.6   |                   |                 |
| 28          | CT Scanner                                | CAT     | 981,627    | 1,399.7   | 117.5    | 571.7    | /////// | 0.0     | 0.0     | 2,088.9   | 108.6    | 106.5   | 2,304.1   |                   |                 |
| 29          | Radiology-Therapeutic                     | RAT     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 30          | Nuclear Medicine                          | NUC     | 117,382    | 572.8     | 154.3    | 220.4    | /////// | 0.0     | 0.0     | 947.4     | 162.7    | 36.4    | 1,146.5   |                   |                 |
| 31          | Respiratory Therapy                       | RES     | 1,779,878  | 2,760.9   | 122.4    | 916.2    | /////// | 0.0     | 0.0     | 3,799.4   | 141.5    | 0.0     | 3,940.9   |                   |                 |
| 32          | Pulmonary Function Testing                | PUL     | 40,045     | 106.2     | 19.4     | 46.7     | /////// | 0.0     | 0.0     | 172.3     | 24.6     | 0.0     | 196.9     |                   |                 |
| 33          | Electroencephalography                    | EEG     | 98,429     | 384.0     | 56.0     | 151.1    | /////// | 0.0     | 0.0     | 591.2     | 32.3     | 0.0     | 623.5     |                   |                 |
| 34          | Physical Therapy                          | PTH     | 279,802    | 1,235.2   | 316.0    | 463.2    | /////// | 0.0     | 0.0     | 2,014.4   | 395.4    | 0.0     | 2,409.8   |                   |                 |
| 35          | Occupational Therapy                      | OTH     | 78,237     | 279.8     | 11.1     | 94.9     | /////// | 0.0     | 0.0     | 385.7     | 13.0     | 0.0     | 398.7     |                   |                 |
| 36          | Speech Language Pathology                 | STH     | 74,795     | 286.6     | 0.5      | 94.2     | /////// | 0.0     | 0.0     | 381.3     | 0.7      | 0.0     | 382.0     |                   |                 |
| 37          | Recreational Therapy                      | REC     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 38          | Audiology                                 | AUD     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 39          | Other Physical Medicine                   | OPM     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 40          | Renal Dialysis                            | RDL     | 2,099      | 742.4     | 148.0    | 237.3    | /////// | 0.0     | 0.0     | 1,127.7   | 134.8    | 0.0     | 1,262.5   |                   |                 |
| 41          | Organ Acquisition                         | OA      | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 42          | Leukopheresis                             | LEU     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 43          | Hyperbaric Chamber                        | HYP     | 992        | 99.3      | 46.6     | 46.3     | /////// | 0.0     | 0.0     | 192.3     | 57.3     | 27.5    | 277.1     |                   |                 |
| 44          | Free Standing Emergency                   | FSE     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 45          | Magnetic Resonance Imaging                | MRI     | 269,861    | 713.4     | 174.5    | 281.6    | /////// | 0.0     | 0.0     | 1,169.6   | 216.1    | 364.5   | 1,750.2   |                   |                 |
| 46          | Lithotripsy                               | LIT     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 47          | Rehabilitation                            | RHB     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 48          | Observation                               | OBV     | 113,018    | 2,160.6   | 8.6      | 1,391.4  | /////// | 0.0     | 0.0     | 3,560.5   | 5.0      | 0.0     | 3,565.5   |                   |                 |
| 49          | Ambulance Services-Rebundled              | AMR     | 0          | 0.0       | 0.0      | 0.0      | /////// | /////// | /////// | 0.0       | ///////  | /////// | 0.0       |                   |                 |
| 50          | Transurethral Microwave Thermotherapy     | TMT     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 51          | Oncology O/P Clinic                       | OCL     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 52          | Transurethral Needle Ablation             | TNA     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 53          | Pediatric Step-Down                       | PSD     | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 54          | 340B Clinic Services                      | CL-340  | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 55          | 340B Radiology - Therapeutic              | RAT-340 | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 56          | 340B OR Clinic Services                   | ORC-340 | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 57          | 340B Laboratory Services                  | LAB-340 | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 58          | 340B Drugs                                | CDS-340 | 0          | 0.0       | 0.0      | 0.0      | /////// | 0.0     | 0.0     | 0.0       | 0.0      | 0.0     | 0.0       |                   |                 |
| 59          | Admission Services                        | ADM     | 10,259     | ///////   | 895.1    | 1,124.7  | /////// | /////// | /////// | 2,019.7   | ///////  | /////// | 2,019.7   |                   |                 |
| 60          | Med/Surg Supplies                         | MSS     | 19,424     | 16,537.6  | 1,766.1  | 540.0    | /////// | /////// | /////// | 18,843.7  | 451.0    | /////// | 19,294.7  |                   |                 |
| 61          | Drugs Sold                                | CDS     | 19,424     | 9,015.5   | 4,807.4  | 1,813.5  | /////// | /////// | /////// | 15,636.4  | 274.3    | /////// | 15,910.7  |                   |                 |
| 62          |   |         |            |           |          |          | /////// |         |         |           |          |         |           |                   |                 |
| B           | TOTAL                                     |         | 15,596,800 | 108,504.4 | 24,379.2 | 35,162.8 |         | 231.4   | 0.0     | 168,277.8 | 17,402.1 | 2,460.7 | 188,140.6 |                   |                 |

REVENUE CENTER RATE SUMMARY

INSTITUTION NAME:  
INSTITUTION NUMBER:

NORTHWEST HOSPITAL  
210040

FISCAL YEAR

06/30/2018

|    |   | OFC            |                           | LEVEL III | PAYOR DIFFERENTIAL | LEVEL IV | CROSS SUBSIDY | MISC ADJ | HSCRC ADJ | ADJUST LEVEL IV | AVERAGE RATES |            |
|----|---|----------------|---------------------------|-----------|--------------------|----------|---------------|----------|-----------|-----------------|---------------|------------|
|    |   | Direct offsets | (Discontinued) Difference |           |                    |          |               |          |           |                 |               |            |
|    | DESCRIPTION                               | CODE           | COL 1                     | COL 2     | COL 3              | COL 4    | COL 5         | COL 6    | COL 7     | COL 8           | COL 9         | COL 10     |
| A1 | Med/Surg Acute                            | MSG            | 0.0                       |           | 45,750.7           | 4,439.7  | 50,190.4      |          |           |                 | 50,190.4      | 1,327.8599 |
| 2  | Pediatric Acute                           | PED            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 3  | Psychiatric Acute                         | PSY            | 0.0                       |           | 10,262.4           | 995.9    | 11,258.3      |          |           |                 | 11,258.3      | 1,049.9192 |
| 4  | Obstetrics Acute                          | OBS            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 5  | Definitive Observation                    | DEF            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 6  | Med/Surg Intensive Care                   | MIS            | 0.0                       |           | 6,535.7            | 634.2    | 7,169.9       |          |           |                 | 7,169.9       | 3,463.7065 |
| 7  | Coronary Care                             | CCU            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 8  | Pediatric Intensive Care                  | PIC            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 9  | Neonatal Intensive Care                   | NEO            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 10 | Burn Care                                 | BUR            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 11 | Shock Trauma                              | TRM            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 12 | Oncology                                  | ONC            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 13 | Newborn Nursery                           | NUR            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 14 | Premature Nursery                         | PRE            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 15 | Chronic Care                              | CRH            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 16 | Emergency Services                        | EMG            | 0.0                       |           | 18,333.1           | 1,779.1  | 20,112.2      |          |           |                 | 20,112.2      | 33.2875    |
| 17 | Clinical Services                         | CL             | 0.0                       |           | 8,060.8            | 782.2    | 8,843.0       |          |           |                 | 8,843.0       | 48.3814    |
| 18 | Psych. Day & Night Care                   | PDC            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 19 | Same Day Surgery                          | SDS            | 0.0                       |           | 2,371.2            | 230.1    | 2,601.3       |          |           |                 | 2,601.3       | 561.9540   |
| 20 | Labor & Delivery Services                 | DEL            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 21 | Operating Room                            | OR             | 0.0                       |           | 17,922.8           | 1,739.2  | 19,662.0      |          |           |                 | 19,662.0      | 26.8968    |
| 22 | Operating Room Clinic                     | ORC            | 0.0                       |           | 737.2              | 71.5     | 808.7         |          |           |                 | 808.7         | 5.8924     |
| 23 | Anesthesiology                            | ANS            | 0.0                       |           | 1,943.2            | 188.6    | 2,131.8       |          |           |                 | 2,131.8       | 2.9400     |
| 24 | Laboratory Services                       | LAB            | 0.0                       |           | 9,849.8            | 955.8    | 10,805.6      |          |           |                 | 10,805.6      | 1.3121     |
| 25 | Electrocardiography                       | EKG            | 0.0                       |           | 461.2              | 44.8     | 506.0         |          |           |                 | 506.0         | 1.8515     |
| 26 | Interventional Radiology / Cardiovascular | IRC            | 0.0                       |           | 1,853.3            | 179.8    | 2,033.1       |          |           |                 | 2,033.1       | 40.1851    |
| 27 | Radiology-Diagnostic                      | RAD            | 0.0                       |           | 8,576.6            | 832.3    | 9,408.9       |          |           |                 | 9,408.9       | 13.1251    |
| 28 | CT Scanner                                | CAT            | 0.0                       |           | 2,304.1            | 223.6    | 2,527.7       |          |           |                 | 2,527.7       | 2.5750     |
| 29 | Radiology-Therapeutic                     | RAT            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 30 | Nuclear Medicine                          | NUC            | 0.0                       |           | 1,146.5            | 111.3    | 1,257.8       |          |           |                 | 1,257.8       | 10.7157    |
| 31 | Respiratory Therapy                       | RES            | 0.0                       |           | 3,940.9            | 382.4    | 4,323.3       |          |           |                 | 4,323.3       | 2.4290     |
| 32 | Pulmonary Function Testing                | PUL            | 0.0                       |           | 196.9              | 19.1     | 216.0         |          |           |                 | 216.0         | 5.3942     |
| 33 | Electroencephalography                    | EEG            | 0.0                       |           | 623.5              | 60.5     | 684.0         |          |           |                 | 684.0         | 6.9488     |
| 34 | Physical Therapy                          | PTH            | 0.0                       |           | 2,409.8            | 233.9    | 2,643.7       |          |           |                 | 2,643.7       | 9.4486     |
| 35 | Occupational Therapy                      | OTH            | 0.0                       |           | 398.7              | 38.7     | 437.4         |          |           |                 | 437.4         | 5.5910     |
| 36 | Speech Language Pathology                 | STH            | 0.0                       |           | 382.0              | 37.1     | 419.1         |          |           |                 | 419.1         | 5.6033     |
| 37 | Recreational Therapy                      | REC            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 38 | Audiology                                 | AUD            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 39 | Other Physical Medicine                   | OPM            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 40 | Renal Dialysis                            | RDL            | 0.0                       |           | 1,262.5            | 122.5    | 1,385.0       |          |           |                 | 1,385.0       | 659.8322   |
| 41 | Organ Acquisition                         | OA             | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 42 | Leukopheresis                             | LEU            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 43 | Hyperbaric Chamber                        | HYP            | 0.0                       |           | 277.1              | 26.9     | 304.0         |          |           |                 | 304.0         | 306.4592   |
| 44 | Free Standing Emergency                   | FSE            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 45 | Magnetic Resonance Imaging                | MRI            | 0.0                       |           | 1,750.2            | 169.8    | 1,920.0       |          |           |                 | 1,920.0       | 7.1147     |
| 46 | Lithotripsy                               | LIT            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 47 | Rehabilitation                            | RHB            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 48 | Observation                               | OBV            | 0.0                       |           | 3,565.5            | 346.0    | 3,911.5       |          |           |                 | 3,911.5       | 34.6094    |
| 49 | Ambulance Services-Rebundled              | AMR            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 50 | Transurethral Microwave Thermotherapy     | TMT            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 51 | Oncology O/P Clinic                       | OCL            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 52 | Transurethral Needle Ablation             | TNA            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 53 | Pediatric Step-Down                       | PSD            | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 54 | 340B Clinic Services                      | CL-340         | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 55 | 340B Radiology - Therapeutic              | RAT-340        | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 56 | 340B OR Clinic Services                   | ORC-340        | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 57 | 340B Laboratory Services                  | LAB-340        | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 58 | 340B Drugs                                | CDS-340        | 0.0                       |           | 0.0                | 0.0      | 0.0           |          |           |                 | 0.0           | 0.0000     |
| 59 | Admission Services                        | ADM            | 0.0                       |           | 2,019.7            | 196.0    | 2,215.7       |          |           |                 | 2,215.7       | 215.9772   |
| 60 | Med/Surg Supplies                         | MSS            | 0.0                       |           | 19,294.7           | 1,872.4  | 21,167.1      |          |           |                 | 21,167.1      | 1,089.7359 |
| 61 | Drugs Sold                                | CDS            | 0.0                       |           | 15,910.7           | 1,544.0  | 17,454.7      |          |           |                 | 17,454.7      | 898.6112   |
| 62 |   |                | 0.0                       |           |                    |          |               |          |           |                 |               |            |
| B  | TOTAL                                     |                | 0.0                       |           | 188,140.6          | 18,257.4 | 206,398.0     | 0.0      | 0.0       | 0.0             | 206,398.0     | ////////// |

**OVERHEAD EXPENSE SUMMARY**

**OES**

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|          |                              | DISTRIBUTE TO: |                                       |                               |  |   |
|----------|------------------------------|----------------|---------------------------------------|-------------------------------|--|---|
| EXPENSES |                              | TOTAL          | Physician<br>Part B Centers<br>Sch P2 | Data<br>Processing<br>Sch DP1 | General<br>Service Centers<br>Sch C1 - C14 |   |
| A        | Dietary Services             | 2,826.9        | 0.0                                   |                               | 2,826.9                                    | A |
| B        | Laundry & Linen              | 1,000.9        | 0.0                                   |                               | 1,000.9                                    | B |
| C        | Social Services              | 894.0          | 0.0                                   |                               | 894.0                                      | C |
| D        | Purchasing & Stores          | 807.6          | 0.0                                   |                               | 807.6                                      | D |
| E        | Plant Operations             | 9,602.8        | 0.0                                   |                               | 9,602.8                                    | E |
| F        | Housekeeping                 | 3,887.1        | 0.0                                   |                               | 3,887.1                                    | F |
| G        | Central Services & Supply    | 1,436.5        | 0.0                                   |                               | 1,436.5                                    | G |
| H        | Pharmacy                     | 4,250.5        | 0.0                                   |                               | 4,250.5                                    | H |
| I        | General Accounting           | 1,946.5        | 0.0                                   |                               | 1,946.5                                    | I |
| J        | Patient Accounts             | 4,533.6        | 0.0                                   |                               | 4,533.6                                    | J |
| K        | Hospital Administration      | 14,014.4       | 0.0                                   |                               | 14,014.4                                   | K |
| L        | Medical Records              | 1,729.4        | 0.0                                   |                               | 1,729.4                                    | L |
| M        | Medical Staff Administration | 1,722.3        | 0.0                                   |                               | 1,722.3                                    | M |
| N        | Nursing Administration       | 3,088.0        | 0.0                                   |                               | 3,088.0                                    | N |
| O        | Data Processing              | 8,709.2        | 0.0                                   | 8,709.2                       |  | O |
| P        | Organ Acquisition Overhead   | 0.0            |                                       |                               | 0.0  | P |
| Q        | Totals                       | 60,449.7       | 0.0                                   | 8,709.2                       | 51,740.5                                   | Q |

**ANNUAL COST SURVEY**

**ACS**

INSTITUTION NAME: NORTHWEST HOSPITAL FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

COL 1

COL 2

|     | CATEGORY                                    | COSTS     | PERCENT |     |
|-----|---|-----------|---------|-----|
| A   | Salaries & Wages                            | 84,157.3  | 44.62%  | A   |
| B   | Fringe Benefits                             | 24,951.1  | 13.23%  | B   |
| C   | Depreciation & Amortization                 | 13,272.1  | 7.04%   | C   |
| C01 | Operating Leases                            | 2,345.2   | 1.24%   | C01 |
| D   | Interest Expense                            | 4,245.4   | 2.25%   | D   |
| E   | Medical & Surgical Supplies                 | 16,537.6  | 8.77%   | E   |
| F   | IV Solutions and Pharmacy                   | 9,015.5   | 4.78%   | F   |
| G   | Laundry, Linen, Uniforms                    | 908.8     | 0.48%   | G   |
| H   | Films & Solutions                           | 121.3     | 0.06%   | H   |
| I   | Blood, Plasmanate, Albumin                  | 736.0     | 0.39%   | I   |
| J   | Contracted Services                         | 14,817.4  | 7.86%   | J   |
| K   | Professional Fees                           | 5,016.2   | 2.66%   | K   |
| L   | Agency Nurses                               | 76.6      | 0.04%   | L   |
| M   | Malpractice Insurance                       | 4,013.8   | 2.13%   | M   |
| N   | All Other Insurance                         | 680.4     | 0.36%   | N   |
| O   | Telephone                                   | 154.0     | 0.08%   | O   |
| P   | Utilities & Water                           | 2,634.4   | 1.40%   | P   |
| Q   | Food  | 464.4     | 0.25%   | Q   |
| R   | Printing, Office Supplies, Copying, Postage | 1,506.6   | 0.80%   | R   |
| S   | Chemical, Solutions, Lubrication, Gases     | 932.5     | 0.49%   | S   |
| T   | Other (Detail over 20% of supply cost)      | 2,011.1   | 1.07%   | T   |
| U   | Total                                       | 188,597.9 | 100.00% | U   |

**UNREGULATED SERVICES**

ECF1

UR04

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|   |                |                      |
|---|----------------|----------------------|
|   | VOLUME<br>DATA | FISCAL YEAR<br>UNITS |
| A | Patient Days   | 12,109               |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**SKILLED NURSING CARE**

| SOURCE | WAGES, SALARIES<br>& FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES,<br>REVENUES | EXPENSE<br>REVENUE<br>PER UNIT |
|--------|---|-------------------|--------------------------------|--------------------------------|
|--------|---|-------------------|--------------------------------|--------------------------------|

**FISCAL YEAR DATA**

| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 6,903.7  | 4,759.4  | 11,663.1 | XXXXX  | B   |
|-----|--|-------------|----------|----------|----------|--------|-----|
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH. OA     | 8.7      | XXXXX    | 8.7      | XXXXX  | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTERS  | /////       | XXXXXXXX | XXXXX    | XXXXX    | XXXXX  | D   |
| /// | COST CENTER Col 5                        | COL. 6 CODE | /////    | XXXXXXXX | XXXXX    | XXXXX  | /// |
| D01 | Depreciation & Amortization              | DEP         | 0.0      | 567.4    | 567.4    | XXXXX  | D01 |
| D02 | General Accounting                       | FIS         | 57.1     | 34.4     | 91.5     | XXXXX  | D02 |
| D03 | Hospital Administration                  | MGT         | 622.5    | 36.1     | 658.6    | XXXXX  | D03 |
| D04 | Plant Operations                         | POP         | 144.6    | 186.7    | 331.4    | XXXXX  | D04 |
| D05 |  |             |          |          | 0.0      | XXXXX  | D05 |
| D06 |  |             |          |          | 0.0      | XXXXX  | D06 |
| D07 |  |             |          |          | 0.0      | XXXXX  | D07 |
| D08 |  |             |          |          | 0.0      | XXXXX  | D08 |
| D09 |  |             |          |          | 0.0      | XXXXX  | D09 |
| D10 |  |             |          |          | 0.0      | XXXXX  | D10 |
| D11 |  |             |          |          | 0.0      | XXXXX  | D11 |
| D12 |  |             |          |          | 0.0      | XXXXX  | D12 |
| D13 |  |             |          |          | 0.0      | XXXXX  | D13 |
| D14 |  |             |          |          | 0.0      | XXXXX  | D14 |
| D15 |  |             |          |          | 0.0      | XXXXX  | D15 |
| D16 |  |             |          |          | 0.0      | XXXXX  | D16 |
| E   | Capital Facilities Allowance             | Records     |          | 0.0      | 0.0      | XXXXX  | E   |
| F   | FISCAL Year Adjusted Expenses            | B+C+D+E     | 7,736.5  | 5,584.0  | 13,320.5 | 1.1001 | F   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                     |         |          |       |           |       |   |
|---|---------------------|---------|----------|-------|-----------|-------|---|
| G | FISCAL YEAR REVENUE | RECORDS | XXXXXXXX | XXXXX | 5,619.7   | XXXXX | G |
| H | PROFIT (LOSS)       | G - F   | XXXXXXXX | XXXXX | (7,700.9) | XXXXX | H |

**FTE DATA**

|   |                                 |         |      |  |  |  |   |
|---|---------------------------------|---------|------|--|--|--|---|
| I | FISCAL YEAR HOURS WORKED / 2080 | RECORDS | 67.7 |  |  |  | I |
|---|---------------------------------|---------|------|--|--|--|---|



**UNREGULATED SERVICES**

ULB

UR05

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|   |                    |                      |
|---|--------------------|----------------------|
|   | VOLUME<br>DATA     | FISCAL YEAR<br>UNITS |
| A | CAP, WMU, 1982 Ed. | 0                    |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**LABORATORY NON-PATIENT**

| SOURCE | WAGES, SALARIES<br>& FRINGE<br>BENEFITS | OTHER<br>EXPENSES | TOTAL<br>EXPENSES,<br>REVENUES | EXPENSE<br>REVENUE<br>PER UNIT |
|--------|---|-------------------|--------------------------------|--------------------------------|
|--------|---|-------------------|--------------------------------|--------------------------------|

**FISCAL YEAR DATA**

|     |  |  |             |          |          |       |        |     |
|-----|--|--|-------------|----------|----------|-------|--------|-----|
| B   | FISCAL YEAR EXPENSES                     |  | RECORDS     | 0.0      | 0.0      | 0.0   | XXXXX  | B   |
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. |  | SCH. OA     | 0.0      | XXXXX    | 0.0   | XXXXX  | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTERS  |  | ////        | XXXXXXXX | XXXXX    | XXXXX | XXXXX  | D   |
| /// | COST CENTER Col 5                        |  | COL. 6 CODE | ////     | XXXXXXXX | XXXXX | XXXXX  | /// |
| D01 |  |  |             |          |          | 0.0   | XXXXX  | D01 |
| D02 |  |  |             |          |          | 0.0   | XXXXX  | D02 |
| D03 |  |  |             |          |          | 0.0   | XXXXX  | D03 |
| D04 |  |  |             |          |          | 0.0   | XXXXX  | D04 |
| D05 |  |  |             |          |          | 0.0   | XXXXX  | D05 |
| D06 |  |  |             |          |          | 0.0   | XXXXX  | D06 |
| D07 |  |  |             |          |          | 0.0   | XXXXX  | D07 |
| D08 |  |  |             |          |          | 0.0   | XXXXX  | D08 |
| D09 |  |  |             |          |          | 0.0   | XXXXX  | D09 |
| D10 |  |  |             |          |          | 0.0   | XXXXX  | D10 |
| D11 |  |  |             |          |          | 0.0   | XXXXX  | D11 |
| D12 |  |  |             |          |          | 0.0   | XXXXX  | D12 |
| D13 |  |  |             |          |          | 0.0   | XXXXX  | D13 |
| D14 |  |  |             |          |          | 0.0   | XXXXX  | D14 |
| D15 |  |  |             |          |          | 0.0   | XXXXX  | D15 |
| D16 |  |  |             |          |          | 0.0   | XXXXX  | D16 |
| E   | Capital Facilities Allowance             |  | Records     |          | 0.0      | 0.0   | XXXXX  | E   |
| F   | FISCAL Year Adjusted Expenses            |  | B+C+D+E     | 0.0      | 0.0      | 0.0   | 0.0000 | F   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                     |  |         |          |       |     |       |   |
|---|---------------------|--|---------|----------|-------|-----|-------|---|
| G | FISCAL YEAR REVENUE |  | RECORDS | XXXXXXXX | XXXXX | 7.1 | XXXXX | G |
| H | PROFIT (LOSS)       |  | G - F   | XXXXXXXX | XXXXX | 7.1 | XXXXX | H |

**FTE DATA**

|   |                                 |  |         |     |  |  |  |   |
|---|---------------------------------|--|---------|-----|--|--|--|---|
| I | FISCAL YEAR HOURS WORKED / 2080 |  | RECORDS | 0.0 |  |  |  | I |
|---|---------------------------------|--|---------|-----|--|--|--|---|

**UNREGULATED SERVICES**

UPB

UR06

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|   |             |                   |
|---|-------------|-------------------|
|   | VOLUME DATA | FISCAL YEAR UNITS |
| A | # of FTEs   | 95.6              |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**PHYSICIANS PART B SERVICES**

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

**FISCAL YEAR DATA**

| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 15,545.0 | 6,175.6  | 21,720.6 | XXXXX    | B   |
|-----|--|-------------|----------|----------|----------|----------|-----|
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH. OA     | 12.2     | XXXXX    | 12.2     | XXXXX    | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTERS  | /////       | XXXXXXXX | XXXXX    | XXXXX    | XXXXX    | D   |
| /// | COST CENTER Col 5                        | COL. 6 CODE | /////    | XXXXXXXX | XXXXX    | XXXXX    | /// |
| D01 | General Accounting                       | FIS         | 106.4    | 64.0     | 170.3    | XXXXX    | D01 |
| D02 | Hospital Administration                  | MGT         | 1,159.2  | 67.3     | 1,226.5  | XXXXX    | D02 |
| D03 |  |             |          |          | 0.0      | XXXXX    | D03 |
| D04 |  |             |          |          | 0.0      | XXXXX    | D04 |
| D05 |  |             |          |          | 0.0      | XXXXX    | D05 |
| D06 |  |             |          |          | 0.0      | XXXXX    | D06 |
| D07 |  |             |          |          | 0.0      | XXXXX    | D07 |
| D08 |  |             |          |          | 0.0      | XXXXX    | D08 |
| D09 |  |             |          |          | 0.0      | XXXXX    | D09 |
| D10 |  |             |          |          | 0.0      | XXXXX    | D10 |
| D11 |  |             |          |          | 0.0      | XXXXX    | D11 |
| D12 |  |             |          |          | 0.0      | XXXXX    | D12 |
| D13 |  |             |          |          | 0.0      | XXXXX    | D13 |
| D14 |  |             |          |          | 0.0      | XXXXX    | D14 |
| D15 |  |             |          |          | 0.0      | XXXXX    | D15 |
| D16 |  |             |          |          | 0.0      | XXXXX    | D16 |
| E   | Capital Facilities Allowance             | Records     |          | 0.0      |          | XXXXX    | E   |
| F   | FISCAL Year Adjusted Expenses            | B+C+D+E     | 16,822.8 | 6,306.9  | 23,129.7 | 241.8874 | F   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                     |         |          |       |            |       |   |
|---|---------------------|---------|----------|-------|------------|-------|---|
| G | FISCAL YEAR REVENUE | RECORDS | XXXXXXXX | XXXXX | 10,887.1   | XXXXX | G |
| H | PROFIT (LOSS)       | G - F   | XXXXXXXX | XXXXX | (12,242.6) | XXXXX | H |

**FTE DATA**

|   |                                 |         |      |  |  |  |   |
|---|---------------------------------|---------|------|--|--|--|---|
| I | FISCAL YEAR HOURS WORKED / 2080 | RECORDS | 95.6 |  |  |  | I |
|---|---------------------------------|---------|------|--|--|--|---|

**UNREGULATED SERVICES**

PSS

UR08

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|   |             |                   |
|---|-------------|-------------------|
|   | VOLUME DATA | FISCAL YEAR UNITS |
| A | # of FTEs   | 4                 |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**PHYSICIAN SUPPORT SERVICES**

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

**FISCAL YEAR DATA**

| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 539.8    | 0.0      | 539.8 | XXXXX    | B   |
|-----|--|-------------|----------|----------|-------|----------|-----|
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH. OA     | 0.5      | XXXXX    | 0.5   | XXXXX    | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTERS  | /////       | XXXXXXXX | XXXXX    | XXXXX | XXXXX    | D   |
| /// | COST CENTER Col 5                        | COL. 6 CODE | /////    | XXXXXXXX | XXXXX | XXXXX    | /// |
| D01 |  |             |          |          | 0.0   | XXXXX    | D01 |
| D02 |  |             |          |          | 0.0   | XXXXX    | D02 |
| D03 |  |             |          |          | 0.0   | XXXXX    | D03 |
| D04 |  |             |          |          | 0.0   | XXXXX    | D04 |
| D05 |  |             |          |          | 0.0   | XXXXX    | D05 |
| D06 |  |             |          |          | 0.0   | XXXXX    | D06 |
| D07 |  |             |          |          | 0.0   | XXXXX    | D07 |
| D08 |  |             |          |          | 0.0   | XXXXX    | D08 |
| D09 |  |             |          |          | 0.0   | XXXXX    | D09 |
| D10 |  |             |          |          | 0.0   | XXXXX    | D10 |
| D11 |  |             |          |          | 0.0   | XXXXX    | D11 |
| D12 |  |             |          |          | 0.0   | XXXXX    | D12 |
| D13 |  |             |          |          | 0.0   | XXXXX    | D13 |
| D14 |  |             |          |          | 0.0   | XXXXX    | D14 |
| D15 |  |             |          |          | 0.0   | XXXXX    | D15 |
| D16 |  |             |          |          | 0.0   | XXXXX    | D16 |
| E   | Capital Facilities Allowance             | Records     |          | 0.0      | 0.0   | XXXXX    | E   |
| F   | FISCAL Year Adjusted Expenses            | B+C+D+E     | 540.3    | 0.0      | 540.3 | 153.3881 | F   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                     |         |          |       |         |       |   |
|---|---------------------|---------|----------|-------|---------|-------|---|
| G | FISCAL YEAR REVENUE | RECORDS | XXXXXXXX | XXXXX | 0.0     | XXXXX | G |
| H | PROFIT (LOSS)       | G - F   | XXXXXXXX | XXXXX | (540.3) | XXXXX | H |

**FTE DATA**

|   |                                 |         |     |  |  |  |   |
|---|---------------------------------|---------|-----|--|--|--|---|
| I | FISCAL YEAR HOURS WORKED / 2080 | RECORDS | 3.5 |  |  |  | I |
|---|---------------------------------|---------|-----|--|--|--|---|

**UNREGULATED SERVICES**

UR9

UR09

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR 06/30/2018

INSTITUTION NUMBER: 210040

|   |             |                   |
|---|-------------|-------------------|
|   | VOLUME DATA | FISCAL YEAR UNITS |
| A | Visits      | 0                 |

COL. 1                      COL. 2                      COL. 3                      COL. 4

**HOSPICE CARE**

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

**FISCAL YEAR DATA**

| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 0.0      | 72.6     | 72.6  | XXXXX  | B   |
|-----|--|-------------|----------|----------|-------|--------|-----|
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH. OA     | 0.0      | XXXXX    | 0.0   | XXXXX  | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTERS  | /////       | XXXXXXXX | XXXXX    | XXXXX | XXXXX  | D   |
| /// | COST CENTER Col 5                        | COL. 6 CODE | /////    | XXXXXXXX | XXXXX | XXXXX  | /// |
| D01 |  |             |          |          | 0.0   | XXXXX  | D01 |
| D02 |  |             |          |          | 0.0   | XXXXX  | D02 |
| D03 |  |             |          |          | 0.0   | XXXXX  | D03 |
| D04 |  |             |          |          | 0.0   | XXXXX  | D04 |
| D05 |  |             |          |          | 0.0   | XXXXX  | D05 |
| D06 |  |             |          |          | 0.0   | XXXXX  | D06 |
| D07 |  |             |          |          | 0.0   | XXXXX  | D07 |
| D08 |  |             |          |          | 0.0   | XXXXX  | D08 |
| D09 |  |             |          |          | 0.0   | XXXXX  | D09 |
| D10 |  |             |          |          | 0.0   | XXXXX  | D10 |
| D11 |  |             |          |          | 0.0   | XXXXX  | D11 |
| D12 |  |             |          |          | 0.0   | XXXXX  | D12 |
| D13 |  |             |          |          | 0.0   | XXXXX  | D13 |
| D14 |  |             |          |          | 0.0   | XXXXX  | D14 |
| D15 |  |             |          |          | 0.0   | XXXXX  | D15 |
| D16 |  |             |          |          | 0.0   | XXXXX  | D16 |
| E   | Capital Facilities Allowance             | Records     |          | 0.0      | 0.0   | XXXXX  | E   |
| F   | FISCAL Year Adjusted Expenses            | B+C+D+E     | 0.0      | 72.6     | 72.6  | 0.0000 | F   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                     |         |          |       |       |       |   |
|---|---------------------|---------|----------|-------|-------|-------|---|
| G | FISCAL YEAR REVENUE | RECORDS | XXXXXXXX | XXXXX | 483.3 | XXXXX | G |
| H | PROFIT (LOSS)       | G - F   | XXXXXXXX | XXXXX | 410.7 | XXXXX | H |

**FTE DATA**

|   |                                 |         |  |     |  |  |   |
|---|---------------------------------|---------|--|-----|--|--|---|
| I | FISCAL YEAR HOURS WORKED / 2080 | RECORDS |  | 0.0 |  |  | I |
|---|---------------------------------|---------|--|-----|--|--|---|

**UNREGULATED SERVICES SUMMARY**

**URS**

INSTITUTION NAME: NORTHWEST HOSPITAL BASE YEAR #####  
 INSTITUTION NUMBER: 210040

| Schedule | Entity Name and Address   | Nature of Service            |
|----------|---|------------------------------|
| UR-1     |   | FREESTANDING CLINIC SERVICES |
|          |   |                              |
|          |   |                              |
|          |   |                              |
| UR-2     |   | HOME HEALTH SERVICES         |
|          |   |                              |
|          |   |                              |
|          |   |                              |
| UR-3     |   | OUTPATIENT RENAL DIALYSIS    |
|          |   |                              |
|          |   |                              |
|          |   |                              |
| UR-4     | Subacute Unit<br>Northwest Hospital Center<br>5401 Old Court Road<br>Randallstown, Md. 21133          | SKILLED NURSING CARE         |
|          |   |                              |
| UR-5     | Laboratory Non-Patient<br>Northwest Hospital Center<br>5401 Old Court Road<br>Randallstown, Md. 21133 | LABORATORY NON-PATIENT       |
|          |   |                              |
| UR-6     | Physicians<br>Northwest Hospital Center<br>5401 Old Court Road<br>Randallstown, Md. 21133             | PHYSICIANS PART B SERVICES   |
|          |   |                              |
| UR-7     |   | CERTIFIED NURSE ANESTHETISTS |
|          |   |                              |
|          |   |                              |
|          |   |                              |

|      |                            |                            |
|------|----------------------------|----------------------------|
| UR-8 | Physician Support Services | PHYSICIAN SUPPORT SERVICES |
|      | Northwest Hospital Center  |                            |
|      | 5401 Old Court Road        |                            |
|      | Randallstown, Md. 21133    |                            |
|      |                            |                            |

|      |                           |              |
|------|---------------------------|--------------|
| UR-9 | Hospice Services          | HOSPICE CARE |
|      | Northwest Hospital Center |              |
|      | 5401 Old Court Road       |              |
|      | Randallstown, Md. 21133   |              |
|      |                           |              |

|       |  |     |
|-------|--|-----|
| UR-10 |  | TBD |
|       |  |     |
|       |  |     |
|       |  |     |
|       |  |     |

|       |  |     |
|-------|--|-----|
| UR-11 |  | TBD |
|       |  |     |
|       |  |     |
|       |  |     |
|       |  |     |

|       |  |     |
|-------|--|-----|
| UR-12 |  | TBD |
|       |  |     |
|       |  |     |
|       |  |     |
|       |  |     |

|       |  |     |
|-------|--|-----|
| UR-13 |  | TBD |
|       |  |     |
|       |  |     |
|       |  |     |
|       |  |     |

|       |  |     |
|-------|--|-----|
| UR-14 |  | TBD |
|       |  |     |
|       |  |     |
|       |  |     |
|       |  |     |

|       |  |     |
|-------|--|-----|
| UR-15 |  | TBD |
|       |  |     |
|       |  |     |
|       |  |     |
|       |  |     |

TRANSACTIONS WITH RELATED ENTITIES

TRE

INSTITUTION NAME: NORTHWEST HOSPITAL BASE YEAR 06/30/2018  
 INSTITUTION NUMBER: 210040

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

| No. | RELATED ENTITY | VALUE OF ASSET OR SERVICE PROVIDED TO THE HOSPITAL | VALUE OF ASSET OR SERVICE PROVIDED BY THE HOSPITAL | CATEGORY CODE | DESCRIPTION OF TRANSACTION |
|-----|----------------|--|--|---------------|----------------------------|
|-----|----------------|--|--|---------------|----------------------------|

|    |                         |           |  |   |                              |
|----|-------------------------|-----------|--|---|------------------------------|
| 1  | LifeBridge Health, Inc. | 4,919,475 |  | B | Management, I/T, Malpractice |
| 2  |                         |           |  |   |                              |
| 3  |                         |           |  |   |                              |
| 4  |                         |           |  |   |                              |
| 5  |                         |           |  |   |                              |
| 6  |                         |           |  |   |                              |
| 7  |                         |           |  |   |                              |
| 8  |                         |           |  |   |                              |
| 9  |                         |           |  |   |                              |
| 10 |                         |           |  |   |                              |
| 11 |                         |           |  |   |                              |
| 12 |                         |           |  |   |                              |
| 13 |                         |           |  |   |                              |
| 14 |                         |           |  |   |                              |
| 15 |                         |           |  |   |                              |
| 16 |                         |           |  |   |                              |
| 17 |                         |           |  |   |                              |
| 18 |                         |           |  |   |                              |
| 19 |                         |           |  |   |                              |
| 20 |                         |           |  |   |                              |





**SUPPLEMENTAL SCHEDULE 1**

**NORTHWEST HOSPITAL**

**Summary of Other and Non-Operating Revenue**

**For The Fiscal Year Ended June 30, 2018**

**Non-Operating and Net Unregulated Revenue:**

|                                   |          |        |
|-----------------------------------|----------|--------|
| Ambulance Services                | -        | E01    |
| Parking                           | -        | E02    |
| Doctor's Private Office Rent      | 830.0    | E03    |
| Office & Other Rental             | -        | E04    |
| Retail Operations                 | 18,913.5 | E05    |
| Patients Telephones               | -        | E06    |
| Cafeteria                         | 1,400.7  | E07    |
| Day Care Recreation Areas         | -        | E08    |
| Housing                           | -        | E09    |
| Research                          | 7.5      | F01    |
| Nursing Education                 | -        | F02    |
| Other Health Profession Education | -        | F03    |
| Community Health Education        | 427.6    | F04    |
| Freestanding Clinic Services      | -        | UR01   |
| Home Health Services              | -        | UR02   |
| Outpatient Renal Dialysis         | -        | UR03   |
| Skilled Nursing Care              | 5,619.7  | UR04   |
| Laboratory Non-Patient            | 7.1      | UR05   |
| Physicians Part B Services        | 10,887.1 | UR06   |
| Certified Nurse Anesthetists      | -        | UR07   |
| Physician Support Services        | -        | UR08   |
| Hospice Care                      | 483.3    | UR09   |
| TBD                               | -        | UR10   |
| TBD                               | -        | UR11   |
| TBD                               | -        | UR12   |
| TBD                               | -        | UR13   |
| TBD                               | -        | UR14   |
| TBD                               | -        | UR15   |
| Investment Income                 | 6,622.7  | G / GR |
| Other:                            | -        | G / GR |
| Other:                            | -        | G / GR |
| Other:                            | -        | G / GR |
| Other:                            | -        | G / GR |
| Other:                            | -        | G / GR |

Total - RE Line, Col 2., Line M + Line U 45,199.1 Check ->

**SUPPLEMENTAL SCHEDULE 1**

**NORTHWEST HOSPITAL**

**Summary of Other and Non-Operating Revenue**

**For The Fiscal Year Ended June 30, 2018**

**Non-Operating and Net Unregulated Expenses:**

|   |                        |          |
|---|------------------------|----------|
| Ambulance Services                              | -                      | E01      |
| Parking   | -                      | E02      |
| Doctor's Private Office Rent                    | 1,693.5                | E03      |
| Office & Other Rental                           | 312.1                  | E04      |
| Retail Operations                               | 18,170.9               | E05      |
| Patients Telephones                             | -                      | E06      |
| Cafeteria                                       | 1,400.7                | E07      |
| Day Care Recreation Areas                       | -                      | E08      |
| Housing   | -                      | E09      |
| Research  | 9.2                    | F01      |
| Nursing Education                               | -                      | F02      |
| Other Health Profession Education               | -                      | F03      |
| Community Health Education                      | 943.2                  | F04      |
| Freestanding Clinic Services                    | -                      | UR01     |
| Home Health Services                            | -                      | UR02     |
| Outpatient Renal Dialysis                       | -                      | UR03     |
| Skilled Nursing Care                            | 13,320.5               | UR04     |
| Laboratory Non-Patient                          | -                      | UR05     |
| Physicians Part B Services                      | 23,129.7               | UR06     |
| Certified Nurse Anesthetists                    | -                      | UR07     |
| Physician Support Services                      | 540.3                  | UR08     |
| Hospice Care                                    | 72.6                   | UR09     |
| TBD   | -                      | UR10     |
| TBD   | -                      | UR11     |
| TBD   | -                      | UR12     |
| TBD   | -                      | UR13     |
| TBD   | -                      | UR14     |
| TBD   | -                      | UR15     |
| Non Operating Expenses                          | -                      | G / GR   |
| Other:  | -                      | G / GR   |
| Other:  | -                      | G / GR   |
| Other:  | -                      | G / GR   |
| Other:  | -                      | G / GR   |
| Other:  | -                      | G / GR   |
| <b>Total - RE Line, Col 2., Line S + Line V</b> | <b><u>59,592.6</u></b> | Check -> |

**SUPPLEMENTAL SCHEDULE 2**

**NORTHWEST HOSPITAL**

**Reconciliation of Depreciation & Lease / Rentals**

**For The Fiscal Year Ended June 30, 2018**

|                                 | <u>Depreciation</u> | <u>Leases /<br/>Rentals</u> | <u>Total</u>    |
|---------------------------------|---------------------|-----------------------------|-----------------|
| UA Schedule - Line A            | 13,839.5            | 2,345.2                     | 16,184.7        |
| Allocation of E & UR Schedules: |                     |                             |                 |
| E01                             | -                   | -                           | -               |
| E02                             | -                   | -                           | -               |
| E03                             | -                   | -                           | -               |
| E04                             | -                   | -                           | -               |
| E05                             | -                   | -                           | -               |
| E06                             | -                   | -                           | -               |
| E07                             | -                   | -                           | -               |
| E08                             | -                   | -                           | -               |
| E09                             | -                   | -                           | -               |
| UR01                            | -                   | -                           | -               |
| UR02                            | -                   | -                           | -               |
| UR03                            | -                   | -                           | -               |
| UR04                            | 567.4               | -                           | 567.4           |
| UR05                            | -                   | -                           | -               |
| UR06                            | -                   | -                           | -               |
| UR07                            | -                   | -                           | -               |
| UR08                            | -                   | -                           | -               |
| UR09                            | -                   | -                           | -               |
| UR10                            | -                   | -                           | -               |
| UR11                            | -                   | -                           | -               |
| UR12                            | -                   | -                           | -               |
| UR13                            | -                   | -                           | -               |
| UR14                            | -                   | -                           | -               |
| UR15                            | -                   | -                           | -               |
| RE Schedule - Line Q            | <u>13,272.1</u>     | <u>2,345.2</u>              | <u>15,617.3</u> |

## SUPPLEMENTAL SCHEDULE 3

### NORTHWEST HOSPITAL

#### Reconciliation of UCC

For The Fiscal Year Ended June 30, 2018

#### Audited Financial Statements:

|                                  |                 |
|----------------------------------|-----------------|
| Bad Debts                        | 13,710.5        |
| Charity Care                     | 2,067.0         |
| Uncompensated Care per Statement | <u>15,777.5</u> |

#### Trial Balance:

|                                      |                 |
|--------------------------------------|-----------------|
| Bad Debt Write-offs                  | 9,139.5         |
| Charity Write-offs                   | 2,067.0         |
| Change in Balance Sheet Reserve      | -               |
| Bad Debt Recoveries                  | 4,571.0         |
| Other                                | -               |
| Uncompensated Care per Trial Balance | <u>15,777.5</u> |

#### Annual Report of Revenues, Expenses, and Volumes:

|   |                 |
|---|-----------------|
| Uncompensated Care - Schedule PDA                     | 11,546.2        |
| Unregulated Charity & Bad Debts                       | 4,231.3         |
| Medicaid Day Limit UCC included in contractals on F/S | -               |
| Uncompensated Care Per Report                         | <u>15,777.5</u> |

**SUPPLEMENTAL SCHEDULE 4****NORTHWEST HOSPITAL****Detail of MCO Regulated Revenue****For The Fiscal Year Ended June 30, 2018**

| <u>MCO Revenue</u>                | <u>Inpatient</u>   | <u>Outpatient</u>  | <u>Total</u>       |
|-----------------------------------|--------------------|--------------------|--------------------|
| Medicare HMO- Aetna               | \$ 737.8           | \$ 459.0           | \$ 1,196.8         |
| MCO - Americaid                   | 2,738.1            | 4,178.9            | 6,917.1            |
| Medicare HMO-                     | 8.6                | -                  | 8.6                |
| Medicare HMO- Bravo               | -                  | 1.4                | 1.4                |
| MCO - Americhoice                 | 2,438.6            | 2,762.0            | 5,200.6            |
| Medicare HMO- Cigna Healthspring  | 2,288.6            | 1,142.4            | 3,431.0            |
| MCO - Helix Family Choice         | -                  | 59.5               | 59.5               |
| MCO - JAI Medical Systems         | 847.8              | 1,419.6            | 2,267.4            |
| Johns Hopkins Adv - M/C           | 1,147.9            | 539.6              | 1,687.5            |
| MCO - Medstar/Helix Family Choice | 361.1              | 788.0              | 1,149.1            |
| MCO - Maryland Physicians Care    | 3,054.6            | 4,773.4            | 7,828.0            |
| United HC - M/C                   | 530.7              | 144.3              | 674.9              |
| MCO - Priority Partners           | 2,096.0            | 3,450.7            | 5,546.7            |
| MCO - Riverside                   | 628.3              | 728.2              | 1,356.5            |
| United Health - M/C               | 1,122.5            | 699.4              | 1,821.9            |
| MCO -                             | 6,799.7            | 2,079.0            | 8,878.7            |
| all other unidentified            | 19.9               | 1,402.2            | 1,422.0            |
| Total MCO Revenue                 | <u>\$ 24,820.1</u> | <u>\$ 24,627.5</u> | <u>\$ 49,447.6</u> |

## SUPPLEMENTAL SCHEDULE 5

### NORTHWEST HOSPITAL

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

For The Fiscal Year Ended June 30, 2018

|   |    |                 |
|---|----|-----------------|
| Income Statement  |    |                 |
| RE Line T Excess (Deficit) Operating Rev. Over Operating Expenses | \$ | 21,684.5        |
| RE Line U Detailed Non-Operating: Income / (Expense)              |    |                 |
| U1 Contributions (Unrestricted)                                   |    |                 |
| U2 Interest & Investment Income                                   |    | 317.5           |
| U3 Investment - Gains / (Losses) - Realized                       |    | 226.7           |
| U4 Investment - Gains / (Losses) - Unrealized                     |    | 1,868.1         |
| U5 Swap Agreements - Gains / (Losses) - Realized                  |    |                 |
| V Other (Specify)   |    | 4,210.4         |
| RE Line W Excess Profit / (Loss)                                  |    | <u>28,307.2</u> |
| Other Significant Financial Information                           |    |                 |
| CC Swap Agreements - Gains / (Losses) - Unrealized                |    |                 |
| DD Collateral Received / (Posted) - Swap Agreements               |    |                 |
| EE Retirement of Debt - Gains / (Losses)                          |    |                 |
| FF Pension Adjustments - Defined Benefit Plans                    |    |                 |
| GG Other (Specify)  |    |                 |
| HH Total  | \$ | <u>-</u>        |

## SUPPLEMENTAL SCHEDULE 6

### NORTHWEST HOSPITAL

#### Debt Collection/Financial Assistance Report

For The Fiscal Year Ended June 30, 2018

#### 1. Collection Agency Name

- a. Credit Collection Services
- b. Herbert A. Thaler, Jr., Attorney at Law
- c. NCO Financial Systems, Inc.
- d. Receivables Outsourcing, Inc.
- e. United Collection Bureau, Incorporated
- f. State Collection Service, Inc.
- g.
- h.

#### 2. Number of Liens

- i. -

#### 3. Number of extended payment plans

- j. -

#### FINANCIAL ASSISTANCE

#### 4. Number of applications for financial assistance received

- k. 958 completed applications

#### 5. Number of applicants for financial assistance approved

- l. 938 approved applications

**SUPPLEMENTAL SCHEDULE 7**

**NORTHWEST HOSPITAL**

**Hospital Outpatient Services Survey**

**For The Fiscal Year Ended June 30, 2018**

| Name of Outpatient Service    | Description of Services Provided | Physical Location/Address                                    | Regulated/Unregulated |
|-------------------------------|----------------------------------|--|-----------------------|
| SLEEP STUDY CENTER            | SLEEP STUDY CENTER               | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| WOUND CARE                    | SURGICAL CLINIC                  | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| OUTPATIENT INFUSION CENTER    | INFUSION CLINIC                  | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| EMERGENCY ROOM                | EMERGENCY SERVICES               | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| CLINIC-PSYCH                  | ER PSYCH CLINIC                  | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| MEDICAL NUTRITION CLINIC      | MEDICAL NUTRITION                | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| HBOT-HYPERBARIC TREATMENT CTR | HYPERBARIC CHAMBER               | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| OPERATING ROOM                | SURGERY SERVICES                 | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| OPERATING ROOM                | RECOVERY SERVICES                | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| RESPIRATORY THERAPY           | RESPIRATORY THERAPY              | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| SPEECH THERAPY                | SPEECH THERAPY                   | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| OCCUPATIONAL THERAPY          | OCCUPATIONAL THERAPY             | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| PHYSICAL THERAPY              | PHYSICAL THERAPY                 | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| PHARMACY AMBULATORY CLINIC    | ANTICOAGULATION CLINIC           | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| PULMONARY FUNCTION            | PULMONARY FUNCTION               | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| ULTRA SOUND-DIAGNOSTIC        | ULTRA SOUND-DIAGNOSTIC           | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| NUCLEAR MEDICINE              | NUCLEAR MEDICINE                 | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| CAT SCAN                      | CAT SCAN                         | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| RENAL DIALYSIS REVENUE        | RENAL DIALYSIS REVENUE           | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| MRI                           | MRI                              | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| INTERVENTIONAL RADIOLOGY      | INTERVENTIONAL RADIOLOGY         | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| OPERATING ROOM                | ANESTHESIOLOGY                   | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| RADIOLOGY                     | RADIOLOGY                        | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| CARDIO-VASCULAR SERVICES      | CARDIO-VASCULAR SERVICES         | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| CARDIOLOGY                    | CARDIOLOGY                       | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| CARDIAC CATH LAB              | CARDIAC CATH LAB                 | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| CLINICAL LABORATORY           | CLINICAL LABORATORY              | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| BLOOD BANK LAB                | BLOOD BANK LAB                   | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| BREAST CARE CENTER            | BREAST CARE CENTER               | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| PULMONARY REHAB               | PULMONARY REHAB                  | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| CARDIAC REHAB                 | CARDIAC REHAB                    | MAIN HOSPITAL-5401 Old Court Road, Randallstown, MD 21133    | Regulated             |
| NEURODIAGNOSTICS              | NEURODIAGNOSTICS                 | PROF OFFICE BLDG 5415 Old Court Road, Randallstown, MD 21133 | Regulated             |



## SUPPLEMENTAL SCHEDULE 8

### Gross Patient Revenue Reconciliation

For The Fiscal Year Ended June 30, 2018

Institution Name: NORTHWEST HOSPITAL

Institution Number: 210040

Please enter revenue results in \$1,000's.

#### Section I

#### TOTAL GROSS PATIENT REVENUE

| Line # |                             | Col 1<br>Inpatient | Col 2<br>Outpatient | Col 3<br>Total |
|--------|-----------------------------|--------------------|---------------------|----------------|
| 1      | Total In-State Revenue      | \$ 138,998         | \$ 122,698          | \$ 261,696     |
| 2      | Total Out-State Revenue     | \$ 1,982           | \$ 3,249            | \$ 5,231       |
| 3      | Total Gross Patient Revenue | \$ 140,980         | \$ 125,948          | \$ 266,928     |

#### Section II

#### TOTAL MEDICARE REVENUE

|   | Col 1<br>In-State<br>I/P Revenue | Col 2<br>Out-State<br>I/P Revenue | Col 3<br>In-State<br>O/P Revenue | Col 4<br>Out-State<br>O/P Revenue | Col 5<br>Total<br>Revenue |
|---|----------------------------------|-----------------------------------|----------------------------------|-----------------------------------|---------------------------|
| 4 | Medicare FFS Revenue             | \$ 74,989                         | \$ 695                           | \$ 41,515                         | \$ 117,466                |
| 5 | Medicare Non-FFS Revenue         | \$ 7,718                          | \$ 50                            | \$ 4,399                          | \$ 12,178                 |
| 6 | Total Medicare Revenue           | \$ 82,707                         | \$ 744                           | \$ 45,914                         | \$ 129,644                |

**SUPPLEMENTAL SCHEDULE 9**

**UR6-A**

**Physician Part B Services - UR6 Addendum (UR6-A)**

INSTITUTION NAME: NORTHWEST HOSPITAL

FISCAL YEAR

06/30/2018

INSTITUTION NUMBER: 210040

Schedule UR6-A is provided to enable hospitals to identify the Physician Part B Services cost, revenue, and FTEs reported on Schedule UR6 by physician category. A reconciliation of this schedule to the UR6 schedule will be required beginning with the FY2016 Special Audit Procedures.

**Instructions:**

- 1) Enter the appropriate code and description for each physician type at the hospital, with separate lines for hospital vs. non-hospital based physicians.  
A directory of codes and description can be found below.  
 If your hospital has both hospital and non-hospital based physicians in the same category, use one line for hospital based and a separate line for non-hospital based physicians.
- 2) Enter expenses and revenues in thousands, rounded to one decimal place.
- 3) Indicate "Yes" or "No" in the "Hospital Based" column for the line in question.  
 For the purposes of this report, only House Staff, Pathologists, Radiologists, and Anesthesiologists can be considered "Hospital Based."
- 4) Enter the FTEs for each line. FTEs should be rounded to one decimal place.
- 5) Verify that the data entered matches Schedule UR6 using the check at the bottom of this schedule.

| COL. 1       | COL. 2                       | COL. 3  | COL. 4                | COL. 5                | COL. 6         | COL. 7                | COL. 8      |
|--------------|------------------------------|---|-----------------------|-----------------------|----------------|-----------------------|-------------|
| <u>Code</u>  | <u>Physician Description</u> | <u>Wages, Salaries, &amp;<br/>Fringe Benefits</u> | <u>Other Expenses</u> | <u>Total Expenses</u> | <u>Revenue</u> | <u>Hospital Based</u> | <u>FTEs</u> |
| 1            | General Practice             | \$ 2,564.6  | \$ 794.7              | \$ 3,359.3            | \$ 1,715.7     | No                    | 10.7        |
| 1            | General Practice             | 7,459.4   | 1,139.8               | 8,599.2               | 4,214.3        | Yes                   | 43.9        |
| 2            | General Surgery              | 1,413.5   | 392.8                 | 1,806.4               | 957.2          | No                    | 9.9         |
| 5            | Anesthesiology               | -   | 1,491.9               | 1,491.9               | -              | Yes                   | -           |
| 6            | Cardiology                   | -   | 164.2                 | 164.2                 | -              | No                    | -           |
| 10           | Gastroenterology             | 158.5   | 6.5                   | 165.0                 | 16.2           | No                    | 2.0         |
| 13           | Neurology                    | 134.4   | \$ 0.4                | 134.8                 |                | No                    | 1.7         |
| 16           | Obstetrics & Gynecology      | -   | 40.0                  | 40.0                  |                | No                    |             |
| 18           | Ophthalmology                | 451.6   | 33.4                  | 485.0                 | 328.8          | No                    | 1.2         |
| 20           | Orthopedic Surgery           | 2,618.6   | 867.3                 | 3,485.9               | 2,860.2        | No                    | 17.2        |
| 26           | Psychiatry                   | 51.9  | 238.7                 | 290.6                 |                | No                    | 0.4         |
| 33           | Thoracic Surgery             | 264.8   | -                     | 264.8                 |                | No                    | 0.2         |
| 34           | Urology                      | -   | 75.8                  | 75.8                  |                | No                    |             |
| 77           | Vascular Surgery             |   | 186.4                 | 186.4                 |                | No                    |             |
| 90           | Medical Oncology             | 668.2   | 80.5                  | 748.7                 | 354.9          | No                    | 3.8         |
| 91           | Surgical Oncology            | 538.0   | 73.2                  | 611.2                 | 220.7          | No                    | 3.6         |
| 93           | Emergency Medicine           | -   | 548.0                 | 548.0                 |                | No                    |             |
| 94           | Interventional Radiology     | 499.4   | 173.4                 | 672.8                 | 219.2          | Yes                   | 1.0         |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
| <b>Total</b> |                              | \$ 16,822.8                                       | \$ 6,306.9            | \$ 23,129.8           | \$ 10,887.1    | <b>Combined</b>       | <b>95.6</b> |