

THIS REPORT IS REQUIRED BY LAW (42 USC 1395g; 42 CFR 413.20(b)).  
 FAILURE TO REPORT CAN RESULT IN ALL INTERIM PAYMENTS MADE SINCE  
 THE BEGINNING OF THE COST REPORT PERIOD BEING DEEMED OVERPAYMENTS  
 (42 USC 1395g).

FORM APPROVED  
 OMB NO. 0938-0050

WORKSHEET S  
 PARTS I & II

HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX		PROVIDER NO:		PERIOD		INTERMEDIARY USE ONLY		DATE RECEIVED:
COST REPORT CERTIFICATION AND SETTLEMENT SUMMARY		15-0158		FROM 1/ 1/2010		--AUDITED --DESK REVIEW		/ /
				TO 12/31/2010		--INITIAL --REOPENED		INTERMEDIARY NO:
						--FINAL 1-MCR CODE		
						00 - # OF REOPENINGS		

ELECTRONICALLY FILED COST REPORT DATE: 6/20/2011 TIME 16:45

PART I - CERTIFICATION

MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION CONTAINED IN THIS COST REPORT MAY BE PUNISHABLE BY CRIMINAL, CIVIL AND ADMINISTRATIVE ACTION, FINE AND/OR IMPRISONMENT UNDER FEDERAL LAW. FURTHERMORE, IF SERVICES IDENTIFIED BY THIS REPORT WERE PROVIDED OR PROCURED THROUGH THE PAYMENT DIRECTLY OR INDIRECTLY OF A KICKBACK OR WHERE OTHERWISE ILLEGAL, CRIMINAL, CIVIL AND ADMINISTRATIVE ACTION, FINES AND/OR IMPRISONMENT MAY RESULT.

CERTIFICATION BY OFFICER OR ADMINISTRATOR OF PROVIDER(S)

I HEREBY CERTIFY THAT I HAVE READ THE ABOVE STATEMENT AND THAT I HAVE EXAMINED THE ACCOMPANYING ELECTRONICALLY FILED OR MANUALLY SUBMITTED COST REPORT AND THE BALANCE SHEET AND STATEMENT OF REVENUE AND EXPENSES PREPARED BY:  
 CLARIAN WEST MEDICAL CENTER 15-0158

FOR THE COST REPORTING PERIOD BEGINNING 1/ 1/2010 AND ENDING 12/31/2010 AND THAT TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS A TRUE, CORRECT, AND COMPLETE STATEMENT PREPARED FROM THE BOOKS AND RECORDS OF THE PROVIDER IN ACCORDANCE WITH APPLICABLE INSTRUCTIONS, EXCEPT AS NOTED. I FURTHER CERTIFY THAT I AM FAMILIAR WITH THE LAWS AND REGULATIONS REGARDING THE PROVISION OF HEALTH CARE SERVICES, AND THAT THE SERVICES IDENTIFIED IN THIS COST REPORT WERE PROVIDED IN COMPLIANCE WITH SUCH LAWS AND REGULATIONS.

\_\_\_\_\_  
 OFFICER OR ADMINISTRATOR OF PROVIDER(S)

\_\_\_\_\_  
 TITLE

\_\_\_\_\_  
 DATE

PART II - SETTLEMENT SUMMARY

		TITLE V	A	TITLE XVIII	B	TITLE XIX	
		1	2	3	4		
1	HOSPITAL	0	194,411	82,229	0		
100	TOTAL	0	194,411	82,229	0		

THE ABOVE AMOUNTS REPRESENT "DUE TO" OR "DUE FROM" THE APPLICABLE PROGRAM FOR THE ELEMENT OF THE ABOVE COMPLEX INDICATED

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0050. The time required to complete this information collection is estimated 662 hours per response, including the time to review instructions, search existing resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: Centers for Medicare & Medicaid Services, 7500 Security Boulevard, N2-14-26, Baltimore, MD 21244-1850, and to the Office of the Information and Regulatory Affairs, Office of Management and Budget, Washington, D.C. 20503.











COMPONENT	I & R FTES		--- FULL TIME EQUIV ---		----- DISCHARGES -----			TOTAL ALL PATIENTS
	NET	EMPLOYEES ON PAYROLL	NONPAID WORKERS	TITLE V	TITLE XVIII	TITLE XIX		
14 SUBPROVIDER	9	10	11	12	13	14	15	
15 SKILLED NURSING FACILITY								
16 NURSING FACILITY								
16 01 ICF/MR								
17 OTHER LONG TERM CARE								
18 HOME HEALTH AGENCY								
20 AMBULATORY SURGICAL CENTER (								
21 HOSPICE								
23 CORF								
25 TOTAL		708.37						
26 OBSERVATION BED DAYS								
27 AMBULANCE TRIPS								
28 EMPLOYEE DISCOUNT DAYS								
28 01 EMP DISCOUNT DAYS -IRF								
29 LABOR & DELIVERY DAYS								

PART II - WAGE DATA	AMOUNT REPORTED 1	RECLASS OF SALARIES 2	ADJUSTED SALARIES 3	PAID HOURS RELATED TO SALARY 4	AVERAGE HOURLY WAGE 5	DATA SOURCE 6
SALARIES						
1 TOTAL SALARY	42,499,400	-268,008	42,231,392	1,469,061.00	28.75	
2 NON-PHYSICIAN ANESTHETIST PART A						
3 NON-PHYSICIAN ANESTHETIST PART B						
4 PHYSICIAN - PART A						
4.01 TEACHING PHYSICIAN SALARIES (SEE INSTRUCTIONS)						
5 PHYSICIAN - PART B						
5.01 NON-PHYSICIAN - PART B						
6 INTERNS & RESIDENTS (APPRVD)						
6.01 CONTRACT SERVICES, I&R						
7 HOME OFFICE PERSONNEL						
8 SNF						
8.01 EXCLUDED AREA SALARIES	604,011		604,011	23,410.00	25.80	
OTHER WAGES & RELATED COSTS						
9 CONTRACT LABOR:	268,817		268,817	4,449.25	60.42	
9.01 PHARMACY SERVICES UNDER CONTRACT						
9.02 LABORATORY SERVICES UNDER CONTRACT						
9.03 MANAGEMENT & ADMINISTRATIVE UNDER CONTRACT						
10 CONTRACT LABOR: PHYS PART A						
10.01 TEACHING PHYSICIAN UNDER CONTRACT (SEE INSTRUCTIONS)						
11 HOME OFFICE SALARIES & WAGE RELATED COSTS	6,886,402		6,886,402	258,822.00	26.61	
12 HOME OFFICE: PHYS PART A						
12.01 TEACHING PHYSICIAN SALARIES (SEE INSTRUCTIONS)						
WAGE RELATED COSTS						
13 WAGE-RELATED COSTS (CORE)	9,929,460		9,929,460			CMS 339
14 WAGE-RELATED COSTS (OTHER)						CMS 339
15 EXCLUDED AREAS	137,519		137,519			CMS 339
16 NON-PHYS ANESTHETIST PART A						CMS 339
17 NON-PHYS ANESTHETIST PART B						CMS 339
18 PHYSICIAN PART A						CMS 339
18.01 PART A TEACHING PHYSICIANS						CMS 339
19 PHYSICIAN PART B						CMS 339
19.01 WAGE-RELATED COSTS (RHC/FOHC)						CMS 339
20 INTERNS & RESIDENTS (APPRVD)						CMS 339
OVERHEAD COSTS - DIRECT SALARIES						
21 EMPLOYEE BENEFITS	343,421		343,421	10,812.00	31.76	
22 ADMINISTRATIVE & GENERAL A & G UNDER CONTRACT	2,489,653	808	2,490,461	70,743.00	35.20	
22.01 A & G UNDER CONTRACT						
23 MAINTENANCE & REPAIRS	596,436		596,436	28,669.00	20.80	
24 OPERATION OF PLANT						
25 LAUNDRY & LINEN SERVICE						
26 HOUSEKEEPING	932,545		932,545	79,434.00	11.74	
26.01 HOUSEKEEPING UNDER CONTRACT						
27 DIETARY	1,015,059	-419,930	595,129	41,204.00	14.44	
27.01 DIETARY UNDER CONTRACT						
28 CAFETERIA		419,930	419,930	29,074.00	14.44	
29 MAINTENANCE OF PERSONNEL						
30 NURSING ADMINISTRATION	1,568,593		1,568,593	38,173.00	41.09	
31 CENTRAL SERVICE AND SUPPLY	231,014		231,014	12,800.00	18.05	
32 PHARMACY	1,777,897		1,777,897	49,959.00	35.59	
33 MEDICAL RECORDS & MEDICAL RECORDS LIBRARY						
34 SOCIAL SERVICE	148,852		148,852	5,105.00	29.16	
35 OTHER GENERAL SERVICE						
PART III - HOSPITAL WAGE INDEX SUMMARY						
1 NET SALARIES	42,499,400	-268,008	42,231,392	1,469,061.00	28.75	
2 EXCLUDED AREA SALARIES	604,011		604,011	23,410.00	25.80	
3 SUBTOTAL SALARIES	41,895,389	-268,008	41,627,381	1,445,651.00	28.79	
4 SUBTOTAL OTHER WAGES & RELATED COSTS	7,155,219		7,155,219	263,271.25	27.18	
5 SUBTOTAL WAGE-RELATED COSTS	9,929,460		9,929,460		23.85	
6 TOTAL	58,980,068	-268,008	58,712,060	1,708,922.25	34.36	
7 NET SALARIES						
8 EXCLUDED AREA SALARIES						
9 SUBTOTAL SALARIES						
10 SUBTOTAL OTHER WAGES & RELATED COSTS						
11 SUBTOTAL WAGE-RELATED COSTS						
12 TOTAL						
13 TOTAL OVERHEAD COSTS	9,103,470	808	9,104,278	365,973.00	24.88	

DESCRIPTION

UNCOMPENSATED CARE INFORMATION		
1	DO YOU HAVE A WRITTEN CHARITY CARE POLICY?	
2	ARE PATIENTS WRITE-OFFS IDENTIFIED AS CHARITY? IF YES ANSWER LINES 2.01 THRU 2.04	
2.01	IS IT AT THE TIME OF ADMISSION?	
2.02	IS IT AT THE TIME OF FIRST BILLING?	
2.03	IS IT AFTER SOME COLLECTION EFFORT HAS BEEN MADE?	
2.04		
3	ARE CHARITY WRITE-OFFS MADE FOR PARTIAL BILLS?	
4	ARE CHARITY DETERMINATIONS BASED UPON ADMINISTRATIVE JUDGMENT WITHOUT FINANCIAL DATA?	
5	ARE CHARITY DETERMINATIONS BASED UPON INCOME DATA ONLY?	
6	ARE CHARITY DETERMINATIONS BASED UPON NET WORTH (ASSETS) DATA?	
7	ARE CHARITY DETERMINATIONS BASED UPON INCOME AND NET WORTH DATA?	
8	DOES YOUR ACCOUNTING SYSTEM SEPARATELY IDENTIFY BAD DEBT AND CHARITY CARE? IF YES ANSWER 8.01	
8.01	DO YOU SEPARATELY ACCOUNT FOR INPATIENT AND OUTPATIENT SERVICES?	
9	IS DISCERNING CHARITY FROM BAD DEBT A HIGH PRIORITY IN YOUR INSTITUTION? IF NO ANSWER 9.01 THRU 9.04	
9.01	IS IT BECAUSE THERE IS NOT ENOUGH STAFF TO DETERMINE ELIGIBILITY?	
9.02	IS IT BECAUSE THERE IS NO FINANCIAL INCENTIVE TO SEPARATE CHARITY FROM BAD DEBT?	
9.03	IS IT BECAUSE THERE IS NO CLEAR DIRECTIVE POLICY ON CHARITY DETERMINATION?	
9.04	IS IT BECAUSE YOUR INSTITUTION DOES NOT DEEM THE DISTINCTION IMPORTANT?	
10	IF CHARITY DETERMINATIONS ARE MADE BASED UPON INCOME DATA, WHAT IS THE MAXIMUM INCOME THAT CAN BE EARNED BY PATIENTS (SINGLE WITHOUT DEPENDENT) AND STILL DETERMINED TO BE A CHARITY WRITE OFF?	
11	IF CHARITY DETERMINATIONS ARE MADE BASED UPON INCOME DATA, IS THE INCOME DIRECTLY TIED TO FEDERAL POVERTY LEVEL? IF YES ANSWER 11.01 THRU 11.04	
11.01	IS THE PERCENTAGE LEVEL USED LESS THAN 100% OF THE FEDERAL POVERTY LEVEL?	
11.02	IS THE PERCENTAGE LEVEL USED BETWEEN 100% AND 150% OF THE FEDERAL POVERTY LEVEL?	
11.03	IS THE PERCENTAGE LEVEL USED BETWEEN 150% AND 200% OF THE FEDERAL POVERTY LEVEL?	
11.04	IS THE PERCENTAGE LEVEL USED GREATER THAN 200% OF THE FEDERAL POVERTY LEVEL?	
12	ARE PARTIAL WRITE-OFFS GIVEN TO HIGHER INCOME PATIENTS ON A GRADUAL SCALE?	
13	IS THERE CHARITY CONSIDERATION GIVEN TO HIGH NET WORTH PATIENTS WHO HAVE CATASTROPHIC OR OTHER EXTRAORDINARY MEDICAL EXPENSES?	
14	IS YOUR HOSPITAL STATE OR LOCAL GOVERNMENT OWNED? IF YES ANSWER LINES 14.01 AND 14.02	
14.01	DO YOU RECEIVE DIRECT FINANCIAL SUPPORT FROM THAT GOVERNMENT ENTITY FOR THE PURPOSE OF PROVIDING COMPENSATED CARE?	
14.02	WHAT PERCENTAGE OF THE AMOUNT ON LINE 14.01 IS FROM GOVERNMENT FUNDING?	
15	DO YOU RECEIVE RESTRICTED GRANTS FOR RENDERING CARE TO CHARITY PATIENTS?	
16	ARE OTHER NON-RESTRICTED GRANTS USED TO SUBSIDIZE CHARITY CARE?	
UNCOMPENSATED CARE REVENUES		
17	REVENUE FROM UNCOMPENSATED CARE	32,352,226
17.01	GROSS MEDICAID REVENUES	34,673,951
18	REVENUES FROM STATE AND LOCAL INDIGENT CARE PROGRAMS	
19	REVENUE RELATED TO SCHIP (SEE INSTRUCTIONS)	
20	RESTRICTED GRANTS	
21	NON-RESTRICTED GRANTS	
22	TOTAL GROSS UNCOMPENSATED CARE REVENUES	67,026,177
UNCOMPENSATED CARE COST		
23	TOTAL CHARGES FOR PATIENTS COVERED BY STATE AND LOCAL INDIGENT CARE PROGRAMS	
24	COST TO CHARGE RATIO (WKST C, PART I, COLUMN 3, LINE 103, DIVIDED BY COLUMN 8, LINE 103)	.285473
25	TOTAL STATE AND LOCAL INDIGENT CARE PROGRAM COST (LINE 23 * LINE 24)	
26	TOTAL SCHIP CHARGES FROM YOUR RECORDS	
27	TOTAL SCHIP COST, (LINE 24 * LINE 26)	

DESCRIPTION

28	TOTAL GROSS MEDICAID CHARGES FROM YOUR RECORDS	34,673,951
29	TOTAL GROSS MEDICAID COST (LINE 24 * LINE 28)	9,898,477
30	OTHER UNCOMPENSATED CARE CHARGES FROM YOUR RECORDS	32,352,226
31	UNCOMPENSATED CARE COST (LINE 24 * LINE 30)	9,235,687
32	TOTAL UNCOMPENSATED CARE COST TO THE HOSPITAL (SUM OF LINES 25, 27, AND 29)	9,898,477

RECLASSIFICATION AND ADJUSTMENT OF TRIAL BALANCE OF EXPENSES

PROVIDER NO: 15-0158

PERIOD: FROM 1/1/2010 TO 12/31/2010

PREPARED 6/20/2011 WORKSHEET A

COST CENTER	COST CENTER DESCRIPTION	SALARIES	OTHER	TOTAL	RECLASSIFICATIONS	RECLASSIFIED TRIAL BALANCE
		1	2	3	4	5
	GENERAL SERVICE COST CNTR					
1	0100 OLD CAP REL COSTS-BLDG & FIXT					
2	0200 OLD CAP REL COSTS-MVBLE EQUIP					
3	0300 NEW CAP REL COSTS-BLDG & FIXT				3,830,525	3,830,525
3.01	0301 MOB		467,524	467,524	221,151	688,675
3.02	0302 INTEREST				9,986,488	9,986,488
4	0400 NEW CAP REL COSTS-MVBLE EQUIP				6,679,356	6,679,356
5	0500 EMPLOYEE BENEFITS	343,421	469,504	812,925	7,144,091	7,957,016
6.01	0610 NONPATIENT TELEPHONES		69,793	69,793	9,067	78,860
6.02	0620 DATA PROCESSING	163,851	228,442	392,293	-193,426	198,867
6.03	0630 PURCHASING, RECEIVING AND STORES	210,209	105,452	315,661	-45,966	269,695
6.04	0660 OTHER ADMIN STRATIVE AND GENERAL	2,115,593	34,692,217	36,807,810	-19,724,879	17,082,931
7	0700 MAINTENANCE & REPAIRS	596,436	2,904,832	3,501,268	-103,471	3,397,797
8	0800 OPERATION OF PLANT		317,855	317,855	-2,566	315,289
9	0900 LAUNDRY & LINEN SERVICE		477,719	477,719		477,719
10	1000 HOUSEKEEPING	932,545	2,433,472	3,366,017	-160,065	3,205,952
11	1100 DIETARY	1,015,059	1,376,366	2,391,425	-1,149,815	1,241,610
12	1200 CAFETERIA				989,333	989,333
13	1300 MAINTENANCE OF PERSONNEL					
14	1400 NURSING ADMINISTRATION	1,568,593	1,147,557	2,716,150	-259,269	2,456,881
15	1500 CENTRAL SERVICES & SUPPLY	231,014	81,905	312,919	5,196,788	5,509,707
16	1600 PHARMACY	1,777,897	3,961,381	5,739,278	-787,409	4,951,869
17	1700 MEDICAL RECORDS & LIBRARY					
18	1800 SOCIAL SERVICE	148,852	40,622	189,474	-22,320	167,154
20	2000 NONPHYSICIAN ANESTHETISTS					
21	2100 NURSING SCHOOL					
22	2200 I&R SERVICES-SALARY & FRINGES APPRVD					
23	2300 I&R SERVICES-OTHER PRGM COSTS APPRVD					
24	2400 PARAMED ED PRGM					
	INPAT ROUTINE SRVC CNTRS					
25	2500 ADULTS & PEDIATRICS	12,558,427	4,618,816	17,177,243	-3,841,067	13,336,176
26	2600 INTENSIVE CARE UNIT	3,062,595	1,158,726	4,221,321	-734,030	3,487,291
27	2700 CORONARY CARE UNIT					
28	2800 BURN INTENSIVE CARE UNIT					
29	2900 SURGICAL INTENSIVE CARE UNIT					
31	3100 SUBPROVIDER					
33	3300 NURSERY	1,098,295	309,204	1,407,499	332,328	1,739,827
34	3400 SKILLED NURSING FACILITY					
35	3500 NURSING FACILITY					
35.01	3510 ICF/MR					
36	3600 OTHER LONG TERM CARE					
	ANCILLARY SRVC COST CNTRS					
37	3700 OPERATING ROOM	2,011,813	7,834,739	9,846,552	-7,310,432	2,536,120
38	3800 RECOVERY ROOM	1,526,606	467,838	1,994,444	-370,482	1,623,962
39	3900 DELIVERY ROOM & LABOR ROOM					
40	4000 ANESTHESIOLOGY					
41	4100 RADIOLOGY-DIAGNOSTIC	2,986,808	2,209,434	5,196,242	-1,353,877	3,842,365
42	4200 RADIOLOGY-THERAPEUTIC	743,696	601,035	1,344,731	-148,595	1,196,136
43	4300 RADIOISOTOPE					
44	4400 LABORATORY	1,092,957	4,541,342	5,634,299	-709,652	4,924,647
45	4500 PBP CLINICAL LAB SERVICES-PRGM ONLY					
46	4600 WHOLE BLOOD & PACKED RED BLOOD CELLS					
47	4700 BLOOD STORING, PROCESSING & TRANS.					
48	4800 INTRAVENOUS THERAPY					
49	4900 RESPIRATORY THERAPY	1,105,573	408,289	1,513,862	-271,606	1,242,256
50	5000 PHYSICAL THERAPY	1,164,363	548,037	1,712,400	-387,683	1,324,717
51	5100 OCCUPATIONAL THERAPY	212,143	60,278	272,421	-43,665	228,756
52	5200 SPEECH PATHOLOGY	67,033	19,219	86,252	-15,831	70,421
53	5300 ELECTROCARDIOLOGY	469,834	518,952	988,786	-97,427	891,359
54	5400 ELECTROENCEPHALOGRAPHY					
55	5500 MEDICAL SUPPLIES CHARGED TO PATIENTS				1,903,905	1,903,905
55.30	5530 IMPL. DEV. CHARGED TO PATIENT				3,804,838	3,804,838
56	5600 DRUGS CHARGED TO PATIENTS					
57	5700 RENAL DIALYSIS					
58	5800 ASC (NON-DISTINCT PART)					
58.01	5801 ASC (NON-DISTINCT PART)	363,775	904,441	1,268,216	-823,031	445,185
59	3120 CARDIAC CATHETERIZATION LABORATORY					
59.97	3997 CARDIAC REHABILITATION	57,778	74,089	131,867	-41,327	90,540
	OUTPAT SERVICE COST CNTRS					
60	6000 CLINIC					
60.01	6001 CLINIC					
60.02	6002 SLEEP LAB	524,665	310,654	835,319	-160,428	674,891
61	6100 EMERGENCY	3,745,558	1,633,528	5,379,086	-1,177,763	4,201,323
62	6200 OBSERVATION BEDS (NON-DISTINCT PART)					
	OTHER REIMBURS COST CNTRS					
64	6400 HOME PROGRAM DIALYSIS					
65	6500 AMBULANCE SERVICES					
66	6600 DURABLE MEDICAL EQUIP-RENTED					
67	6700 DURABLE MEDICAL EQUIP-SOLD					
69	6900 CORF					
70	7000 I&R SERVICES-NOT APPRVD PRGM					
71	7100 HOME HEALTH AGENCY					
	SPEC PURPOSE COST CENTERS					
82	8200 LUNG ACQUISITION					
83	8300 KIDNEY ACQUISITION					
84	8400 LIVER ACQUISITION					

RECLASSIFICATION AND ADJUSTMENT OF  
TRIAL BALANCE OF EXPENSES

PROVIDER NO: 15-0158  
PERIOD: FROM 1/1/2010 TO 12/31/2010  
PREPARED 6/20/2011  
WORKSHEET A

COST CENTER	COST CENTER DESCRIPTION	SALARIES 1	OTHER 2	TOTAL 3	RECLASS- IFICATIONS 4	RECLASSIFIED TRIAL BALANCE 5
	SPEC PURPOSE COST CENTERS					
85	8500 HEART ACQUISITION					
85.01	8510 PANCREAS ACQUISITION					
86	8600 OTHER ORGAN ACQUISITION					
88	8800 INTEREST EXPENSE					
89	8900 UTILIZATION REVIEW-SNF					
90	9000 OTHER CAPITAL RELATED COSTS					
92	9200 AMBULATORY SURGICAL CENTER (D. P.)					
93	9300 HOSPICE					
95	SUBTOTALS	41,895,389	74,993,262	116,888,651	161,788	117,050,439
	NONREIMBURS COST CENTERS					
96	9600 GIFT, FLOWER, COFFEE SHOP & CANTEEN	86,820	243,213	330,033	-41,120	288,913
97	9700 RESEARCH					
98	9800 PHYSICIANS' PRIVATE OFFICES					
98.01	9801 RETAIL PHARMACY	332,407	2,150,140	2,482,547	-85,128	2,397,419
98.02	9802 MARKETING	184,784	1,389,685	1,574,469	-35,540	1,538,929
99	9900 NONPAID WORKERS					
101	TOTAL	42,499,400	78,776,300	121,275,700	-0-	121,275,700

RECLASSIFICATION AND ADJUSTMENT OF  
TRIAL BALANCE OF EXPENSES

PROVIDER NO: 15-0158  
PERIOD: FROM 1/1/2010 TO 12/31/2010  
PREPARED 6/20/2011  
WORKSHEET A

COST CENTER	COST CENTER DESCRIPTION	ADJUSTMENTS 6	NET EXPENSES FOR ALLOC 7
	GENERAL SERVICE COST CNTR		
1 0100	OLD CAP REL COSTS-BLDG & FIXT		
2 0200	OLD CAP REL COSTS-MVBLE EQUIP		
3 0300	NEW CAP REL COSTS-BLDG & FIXT	336,005	4,166,530
3.01 0301	MOB	-243,221	445,454
3.02 0302	INTEREST	-488	9,986,000
4 0400	NEW CAP REL COSTS-MVBLE EQUIP	658,875	7,338,231
5 0500	EMPLOYEE BENEFITS	2,025,346	9,982,362
6.01 0610	NONPATIENT TELEPHONES	217,161	296,021
6.02 0620	DATA PROCESSING	4,931,244	5,130,111
6.03 0630	PURCHASING, RECEIVING AND STORES	323,636	593,331
6.04 0660	OTHER ADMINISTRATIVE AND GENERAL	-8,082,560	9,000,371
7 0700	MAINTENANCE & REPAIRS	42,900	3,440,697
8 0800	OPERATION OF PLANT	439,091	754,380
9 0900	LAUNDRY & LINEN SERVICE		477,719
10 1000	HOUSEKEEPING	114,301	3,320,253
11 1100	DIETARY		1,241,610
12 1200	CAFETERIA	-687,193	302,140
13 1300	MAINTENANCE OF PERSONNEL		
14 1400	NURSING ADMINISTRATION	-251,746	2,205,135
15 1500	CENTRAL SERVICES & SUPPLY		5,509,707
16 1600	PHARMACY	-1,362	4,950,507
17 1700	MEDICAL RECORDS & LIBRARY		
18 1800	SOCIAL SERVICE		167,154
20 2000	NONPHYSICIAN ANESTHETISTS		
21 2100	NURSING SCHOOL		
22 2200	I&R SERVICES-SALARY & FRINGES APPRVD		
23 2300	I&R SERVICES-OTHER PRGM COSTS APPRVD		
24 2400	PARAMED ED PRGM		
	INPAT ROUTINE SRVC CNTRS		
25 2500	ADULTS & PEDIATRICS	-144,373	13,191,803
26 2600	INTENSIVE CARE UNIT	-9,311	3,477,980
27 2700	CORONARY CARE UNIT		
28 2800	BURN INTENSIVE CARE UNIT		
29 2900	SURGICAL INTENSIVE CARE UNIT		
31 3100	SUBPROVIDER		
33 3300	NURSERY	-281	1,739,546
34 3400	SKILLED NURSING FACILITY		
35 3500	NURSING FACILITY		
35.01 3510	ICF/MR		
36 3600	OTHER LONG TERM CARE		
	ANCILLARY SRVC COST CNTRS		
37 3700	OPERATING ROOM	-108,430	2,427,690
38 3800	RECOVERY ROOM		1,623,962
39 3900	DELIVERY ROOM & LABOR ROOM		
40 4000	ANESTHESIOLOGY		
41 4100	RADIOLOGY-DIAGNOSTIC	-313,305	3,529,060
42 4200	RADIOLOGY-THERAPEUTIC	-236,302	959,834
43 4300	RADIOISOTOPE		
44 4400	LABORATORY	-935,703	3,988,944
45 4500	PBP CLINICAL LAB SERVICES-PRGM ONLY		
46 4600	WHOLE BLOOD & PACKED RED BLOOD CELLS		
47 4700	BLOOD STORING, PROCESSING & TRANS.		
48 4800	INTRAVENOUS THERAPY		
49 4900	RESPIRATORY THERAPY		1,242,256
50 5000	PHYSICAL THERAPY	-212,756	1,111,961
51 5100	OCCUPATIONAL THERAPY		228,756
52 5200	SPEECH PATHOLOGY		70,421
53 5300	ELECTROCARDIOLOGY	-371,102	520,257
54 5400	ELECTROENCEPHALOGRAPHY		
55 5500	MEDICAL SUPPLIES CHARGED TO PATIENTS		1,903,905
55.30 5530	IMPL. DEV. CHARGED TO PATIENT		3,804,838
56 5600	DRUGS CHARGED TO PATIENTS		
57 5700	RENAL DIALYSIS		
58 5800	ASC (NON-DISTINCT PART)		
58.01 5801	ASC (NON-DISTINCT PART)	-4,632	440,553
59 3120	CARDIAC CATHETERIZATION LABORATORY		
59.97 3997	CARDIAC REHABILITATION	-977	89,563
	OUTPAT SERVICE COST CNTRS		
60 6000	CLINIC		
60.01 6001	CLINIC		
60.02 6002	SLEEP LAB	-79,174	595,717
61 6100	EMERGENCY	-122,713	4,078,610
62 6200	OBSERVATION BEDS (NON-DISTINCT PART)		
	OTHER REIMBURS COST CNTRS		
64 6400	HOME PROGRAM DIALYSIS		
65 6500	AMBULANCE SERVICES		
66 6600	DURABLE MEDICAL EQUIP-RENTED		
67 6700	DURABLE MEDICAL EQUIP-SOLD		
69 6900	CORF		
70 7000	I&R SERVICES-NOT APPRVD PRGM		
71 7100	HOME HEALTH AGENCY		
	SPEC PURPOSE COST CENTERS		
82 8200	LUNG ACQUISITION		
83 8300	KIDNEY ACQUISITION		
84 8400	LIVER ACQUISITION		

RECLASSIFICATION AND ADJUSTMENT OF  
TRIAL BALANCE OF EXPENSES

PROVIDER NO: 15-0158  
PERIOD: FROM 1/1/2010 TO 12/31/2010  
PREPARED 6/20/2011  
WORKSHEET A

COST CENTER	COST CENTER DESCRIPTION	ADJUSTMENTS 6	NET EXPENSES FOR ALLOC 7
	SPEC PURPOSE COST CENTERS		
85	8500 HEART ACQUISITION		
85.01	8510 PANCREAS ACQUISITION		
86	8600 OTHER ORGAN ACQUISITION		
88	8800 INTEREST EXPENSE		-0-
89	8900 UTILIZATION REVIEW-SNF		-0-
90	9000 OTHER CAPITAL RELATED COSTS		-0-
92	9200 AMBULATORY SURGICAL CENTER (D. P.)		
93	9300 HOSPICE		
95	SUBTOTALS	-2,717,070	114,333,369
	NONREIMBURS COST CENTERS		
96	9600 GIFT, FLOWER, COFFEE SHOP & CANTEEN		288,913
97	9700 RESEARCH		
98	9800 PHYSICIANS' PRIVATE OFFICES		
98.01	9801 RETAIL PHARMACY		2,397,419
98.02	9802 MARKETING		1,538,929
99	9900 NONPAID WORKERS		
101	TOTAL	-2,717,070	118,558,630

COST CENTERS USED IN COST REPORT

PROVIDER NO: 15-0158  
 PERIOD: FROM 1/1/2010 TO 12/31/2010  
 PREPARED 6/20/2011  
 NOT A CMS WORKSHEET

LINE NO.	COST CENTER DESCRIPTION	CMS CODE	STANDARD LABEL FOR NON-STANDARD CODES
	GENERAL SERVICE COST		
1	OLD CAP REL COSTS-BLDG & FIXT	0100	
2	OLD CAP REL COSTS-MVBLE EQUIP	0200	
3	NEW CAP REL COSTS-BLDG & FIXT	0300	
3.01	MOB	0301	NEW CAP REL COSTS-BLDG & FIXT
3.02	INTEREST	0302	NEW CAP REL COSTS-BLDG & FIXT
4	NEW CAP REL COSTS-MVBLE EQUIP	0400	
5	EMPLOYEE BENEFITS	0500	
6.01	NONPATIENT TELEPHONES	0610	NONPATIENT TELEPHONES
6.02	DATA PROCESSING	0620	DATA PROCESSING
6.03	PURCHASING, RECEIVING AND STORES	0630	PURCHASING, RECEIVING AND STORES
6.04	OTHER ADMINISTRATIVE AND GENERAL	0660	OTHER ADMINISTRATIVE AND GENERAL
7	MAINTENANCE & REPAIRS	0700	
8	OPERATION OF PLANT	0800	
9	LAUNDRY & LINEN SERVICE	0900	
10	HOUSEKEEPING	1000	
11	DIETARY	1100	
12	CAFETERIA	1200	
13	MAINTENANCE OF PERSONNEL	1300	
14	NURSING ADMINISTRATION	1400	
15	CENTRAL SERVICES & SUPPLY	1500	
16	PHARMACY	1600	
17	MEDICAL RECORDS & LIBRARY	1700	
18	SOCIAL SERVICE	1800	
20	NONPHYSICIAN ANESTHETISTS	2000	
21	NURSING SCHOOL	2100	
22	I&R SERVICES-SALARY & FRINGES APPRVD	2200	
23	I&R SERVICES-OTHER PRGM COSTS APPRVD	2300	
24	PARAMED PRGM	2400	
	INPAT ROUTINE SRVC C		
25	ADULTS & PEDIATRICS	2500	
26	INTENSIVE CARE UNIT	2600	
27	CORONARY CARE UNIT	2700	
28	BURN INTENSIVE CARE UNIT	2800	
29	SURGICAL INTENSIVE CARE UNIT	2900	
31	SUBPROVIDER	3100	
33	NURSERY	3300	
34	SKILLED NURSING FACILITY	3400	
35	NURSING FACILITY	3500	
35.01	ICF/MR	3510	
36	OTHER LONG TERM CARE	3600	
	ANCILLARY SRVC COST		
37	OPERATING ROOM	3700	
38	RECOVERY ROOM	3800	
39	DELIVERY ROOM & LABOR ROOM	3900	
40	ANESTHESIOLOGY	4000	
41	RADIOLOGY-DIAGNOSTIC	4100	
42	RADIOLOGY-THERAPEUTIC	4200	
43	RADIOISOTOPE	4300	
44	LABORATORY	4400	
45	PBP CLINICAL LAB SERVICES-PRGM ONLY	4500	
46	WHOLE BLOOD & PACKED RED BLOOD CELLS	4600	
47	BLOOD STORING, PROCESSING & TRANS.	4700	
48	INTRAVENOUS THERAPY	4800	
49	RESPIRATORY THERAPY	4900	
50	PHYSICAL THERAPY	5000	
51	OCCUPATIONAL THERAPY	5100	
52	SPEECH PATHOLOGY	5200	
53	ELECTROCARDIOLOGY	5300	
54	ELECTROENCEPHALOGRAPHY	5400	
55	MEDICAL SUPPLIES CHARGED TO PATIENTS	5500	
55.30	IMPL. DEV. CHARGED TO PATIENT	5530	IMPL. DEV. CHARGED TO PATIENT
56	DRUGS CHARGED TO PATIENTS	5600	
57	RENAL DIALYSIS	5700	
58	ASC (NON-DISTINCT PART)	5800	
58.01	ASC (NON-DISTINCT PART)	5801	ASC (NON-DISTINCT PART)
59	CARDIAC CATHETERIZATION LABORATORY	3120	CARDIAC CATHETERIZATION LABORATORY
59.97	CARDIAC REHABILITATION	3997	CARDIAC REHABILITATION
	OUTPAT SERVICE COST		
60	CLINIC	6000	
60.01	CLINIC	6001	CLINIC
60.02	SLEEP LAB	6002	CLINIC
61	EMERGENCY	6100	
62	OBSERVATION BEDS (NON-DISTINCT PART)	6200	
	OTHER REIMBURS COST		
64	HOME PROGRAM DIALYSIS	6400	
65	AMBULANCE SERVICES	6500	
66	DURABLE MEDICAL EQUIP-RENTED	6600	
67	DURABLE MEDICAL EQUIP-SOLD	6700	
69	CORF	6900	
70	I&R SERVICES-NOT APPRVD PRGM	7000	
71	HOME HEALTH AGENCY	7100	
	SPEC PURPOSE COST CE		
82	LUNG ACQUISITION	8200	
83	KIDNEY ACQUISITION	8300	
84	LIVER ACQUISITION	8400	
85	HEART ACQUISITION	8500	

COST CENTERS USED IN COST REPORT

PROVIDER NO: 15-0158  
 PERIOD: FROM 1/1/2010 TO 12/31/2010  
 PREPARED 6/20/2011  
 NOT A CMS WORKSHEET

LINE NO.	COST CENTER DESCRIPTION	CMS CODE	STANDARD LABEL FOR NON-STANDARD CODES
	SPEC PURPOSE COST CE		
85.01	PANCREAS ACQUISITION	8510	
86	OTHER ORGAN ACQUISITION	8600	
88	INTEREST EXPENSE	8800	
89	UTILIZATION REVIEW-SNF	8900	
90	OTHER CAPITAL RELATED COSTS	9000	
92	AMBULATORY SURGICAL CENTER (D.P.)	9200	
93	HOSPICE	9300	
95	SUBTOTALS		OLD CAP REL COSTS-BLDG & FIXT
	NONREIMBURS COST CEN		
96	GIFT, FLOWER, COFFEE SHOP & CANTEEN	9600	
97	RESEARCH	9700	
98	PHYSICIANS' PRIVATE OFFICES	9800	
98.01	RETAIL PHARMACY	9801	PHYSICIANS' PRIVATE OFFICES
98.02	MARKETING	9802	PHYSICIANS' PRIVATE OFFICES
99	NONPAID WORKERS	9900	
101	TOTAL		OLD CAP REL COSTS-BLDG & FIXT

RECLASSIFICATIONS

PROVIDER NO:  
150158

PERIOD:  
FROM 1/ 1/2010  
TO 12/31/2010

PREPARED 6/20/2011  
WORKSHEET A-6

EXPLANATION OF RECLASSIFICATION		INCREASE			
CODE (1)	COST CENTER 2	LINE NO 3	SALARY 4	OTHER 5	
1	NON BILLABLE MEDICAL SUPPLIES	A	OTHER ADMINISTRATIVE AND GENERAL	6.04	5,425
2			CENTRAL SERVICES & SUPPLY	15	5,225,458
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29	BILLABLE IMPLANT SUPPLIES	B	OTHER ADMINISTRATIVE AND GENERAL	6.04	55,417
30			IMPL. DEV. CHARGED TO PATIENT	55.30	3,804,838
31					
32	BILLABLE MEDICAL SUPPLIES	C	HOUSEKEEPING	10	13
33			DIETARY	11	10
34			NURSING ADMINISTRATION	14	1,313
35			CENTRAL SERVICES & SUPPLY	15	6,117
1	BILLABLE MEDICAL SUPPLIES	C	PHARMACY	16	698
2			ADULTS & PEDIATRICS	25	2,131
3			RECOVERY ROOM	38	419
4			ELECTROCARDIOLOGY	53	4,082
5			RETAIL PHARMACY	98.01	538
6			MEDICAL SUPPLIES CHARGED TO PATIENTS	55	1,903,905
7			SLEEP LAB	60.02	1
8					
9					
10					
11	PTO	D	EMPLOYEE BENEFITS	5	552,611
12			CENTRAL SERVICES & SUPPLY	15	569
13			SOCIAL SERVICE	18	5,908
14					
15					
16					
17					
18					
19					
20					
21					
22					
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35					

RECLASSIFICATIONS

PROVIDER NO:  
150158

PERIOD:  
FROM 1/1/2010  
TO 12/31/2010

PREPARED 6/20/2011  
WORKSHEET A-6  
CONTD

EXPLANATION OF RECLASSIFICATION	INCREASE				
	CODE (1)	COST CENTER	LINE NO	SALARY	OTHER
	1	2	3	4	5
1 PTO	D				
2					
3					
4 EMPLOYEE BENEFITS	E	EMPLOYEE BENEFITS	5		6,591,568
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34 TELEPHONE EQUIPMENT	F	NONPATIENT TELEPHONES	6.01		9,067
35					
1 CONTRACT LABOR	G	OTHER ADMINISTRATIVE AND GENERAL	6.04	808	
2		ADULTS & PEDIATRICS	25		164,915
3		INTENSIVE CARE UNIT	26		103,901
4 CAFETERIA	H	CAFETERIA	12	419,930	
5		CAFETERIA	12		569,403
6 INTEREST	I	INTEREST	3.02		9,986,488
7 MOB LEASE	J	MOB	3.01		221,151
8 NURSERY	K	NURSERY	33	489,919	55,826
9 PACU	L	ADULTS & PEDIATRICS	25	16,337	1,301
10 DEPRECIATION	M	NEW CAP REL COSTS-BLDG & FIXT	3		3,830,525
11		NEW CAP REL COSTS-MVBLE EQUIP	4		4,825,755
12					
13					
14 LEASE EXPENSE	N	NEW CAP REL COSTS-MVBLE EQUIP	4		2,074,752
15					
16					
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					
32					
33					
34					
36 TOTAL RECLASSIFICATIONS				926,994	40,004,105

(1) A letter (A, B, etc) must be entered on each line to identify each reclassification entry. Transfer the amounts in columns 4, 5, 8, and 9 to Worksheet A, column 4, lines as appropriate. See instructions for column 10 referencing to Worksheet A-7, Part III, columns 9 through 14.

RECLASSIFICATIONS

PROVIDER NO:  
150158

PERIOD:  
FROM 1/1/2010  
TO 12/31/2010

PREPARED 6/20/2011  
WORKSHEET A-6

EXPLANATION OF RECLASSIFICATION		CODE (1)	COST CENTER 6	LINE NO 7	SALARY 8	OTHER 9	A-7 REF 10
1	NON BILLABLE MEDICAL SUPPLIES	A	EMPLOYEE BENEFITS	5		88	
2			DATA PROCESSING	6.02		2	
3			PURCHASING, RECEIVING AND STORES	6.03		893	
4			NURSING ADMINISTRATION	14		924	
5			MAINTENANCE & REPAIRS	7		972	
6			OPERATION OF PLANT	8		91	
7			HOUSEKEEPING	10		19,701	
8			DIETARY	11		4,118	
9			PHARMACY	16		70,944	
10			ADULTS & PEDIATRICS	25		1,135,393	
11			INTENSIVE CARE UNIT	26		212,038	
12			NURSERY	33		38,554	
13			OPERATING ROOM	37		2,030,590	
14			RECOVERY ROOM	38		92,826	
15			RADIOLOGY-DIAGNOSTIC	41		253,663	
16			RADIOLOGY-THERAPEUTIC	42		16,201	
17			LABORATORY	44		476,968	
18			RESPIRATORY THERAPY	49		74,541	
19			PHYSICAL THERAPY	50		44,417	
20			OCCUPATIONAL THERAPY	51		2,370	
21			SPEECH PATHOLOGY	52		2,952	
22			ELECTROCARDIOLOGY	53		21,124	
23			ASC (NON-DISTINCT PART)	58.01		116,070	
24			CARDIAC REHABILITATION	59.97		1,826	
25			SLEEP LAB	60.02		41,251	
26			EMERGENCY	61		572,251	
27			RETAIL PHARMACY	98.01		114	
28			CENTRAL SERVICES & SUPPLY	15		1	
29	BILLABLE IMPLANT SUPPLIES	B	ADULTS & PEDIATRICS	25		4,134	
30			OPERATING ROOM	37		3,846,506	
31			ASC (NON-DISTINCT PART)	58.01		9,615	
32	BILLABLE MEDICAL SUPPLIES	C	PURCHASING, RECEIVING AND STORES	6.03		360	
33			OTHER ADMINISTRATIVE AND GENERAL	6.04		74,029	
34			INTENSIVE CARE UNIT	26		30,470	
35			NURSERY	33		298	
1	BILLABLE MEDICAL SUPPLIES	C	OPERATING ROOM	37		851,843	
2			RADIOLOGY-DIAGNOSTIC	41		321,566	
3			RADIOLOGY-THERAPEUTIC	42		3	
4			LABORATORY	44		151	
5			RESPIRATORY THERAPY	49		8,782	
6			PHYSICAL THERAPY	50		315	
7			OCCUPATIONAL THERAPY	51		1,844	
8			ASC (NON-DISTINCT PART)	58.01		625,254	
9			CARDIAC REHABILITATION	59.97		247	
10			EMERGENCY	61		4,065	
11	PTO	D	DATA PROCESSING	6.02		17,110	
12			PURCHASING, RECEIVING AND STORES	6.03		3,698	
13			OTHER ADMINISTRATIVE AND GENERAL	6.04		250,070	
14			MAINTENANCE & REPAIRS	7		4,736	
15			HOUSEKEEPING	10		3,689	
16			DIETARY	11		1,009	
17			NURSING ADMINISTRATION	14		20,898	
18			PHARMACY	16		18,022	
19			ADULTS & PEDIATRICS	25		93,119	
20			INTENSIVE CARE UNIT	26		10,809	
21			NURSERY	33		1,587	
22			OPERATING ROOM	37		14,582	
23			RECOVERY ROOM	38		6,580	
24			RADIOLOGY-DIAGNOSTIC	41		15,227	
25			RADIOLOGY-THERAPEUTIC	42		6,732	
26			LABORATORY	44		14,571	
27			RESPIRATORY THERAPY	49		19,257	
28			PHYSICAL THERAPY	50		15,316	
29			OCCUPATIONAL THERAPY	51		4,367	
30			SPEECH PATHOLOGY	52		2,169	
31			ELECTROCARDIOLOGY	53		2,581	
32			ASC (NON-DISTINCT PART)	58.01		11,526	
33			CARDIAC REHABILITATION	59.97		2,452	
34			SLEEP LAB	60.02		4,493	
35			EMERGENCY	61		4,032	

RECLASSIFICATIONS

PROVIDER NO:  
150158

PERIOD:  
FROM 1/ 1/2010  
TO 12/31/2010

PREPARED 6/20/2011  
WORKSHEET A-6  
CONTD

						----- DECREASE -----			
EXPLANATION OF RECLASSIFICATION	CODE (1)	COST CENTER	LINE NO	SALARY	OTHER			A-7 REF	
	1	6	7	8	9			10	
1 PTO	D	GIFT, FLOWER, COFFEE SHOP & CANTEEN	96		820				
2		RETAIL PHARMACY	98.01		5,364				
3		MARKETING	98.02		4,272				
4 EMPLOYEE BENEFITS	E	DATA PROCESSING	6.02		20,717				
5		PURCHASING, RECEIVING AND STORES	6.03		32,850				
6		OTHER ADMINISTRATIVE AND GENERAL	6.04		305,510				
7		MAINTENANCE & REPAIRS	7		97,763				
8		HOUSEKEEPING	10		136,688				
9		DIETARY	11		152,891				
10		NURSING ADMINISTRATION	14		238,030				
11		CENTRAL SERVICES & SUPPLY	15		35,355				
12		PHARMACY	16		282,938				
13		SOCIAL SERVICE	18		25,566				
14		ADULTS & PEDIATRICS	25		1,968,511				
15		INTENSIVE CARE UNIT	26		480,713				
16		NURSERY	33		172,978				
17		OPERATING ROOM	37		330,657				
18		RECOVERY ROOM	38		253,857				
19		RADIOLOGY-DIAGNOSTIC	41		461,080				
20		RADIOLOGY-THERAPEUTIC	42		121,181				
21		LABORATORY	44		167,489				
22		RESPIRATORY THERAPY	49		169,026				
23		PHYSICAL THERAPY	50		189,566				
24		OCCUPATIONAL THERAPY	51		35,084				
25		SPEECH PATHOLOGY	52		10,710				
26		ELECTROCARDIOLOGY	53		77,028				
27		ASC (NON-DISTINCT PART)	58.01		57,415				
28		CARDIAC REHABILITATION	59.97		7,089				
29		SLEEP LAB	60.02		82,344				
30		EMERGENCY	61		585,737				
31		GIFT, FLOWER, COFFEE SHOP & CANTEEN	96		13,041				
32		RETAIL PHARMACY	98.01		48,486				
33		MARKETING	98.02		31,268				
34 TELEPHONE EQUIPMENT	F	OTHER ADMINISTRATIVE AND GENERAL	6.04		8,474				
35		RADIOLOGY-DIAGNOSTIC	41		593				
1 CONTRACT LABOR	G	ADULTS & PEDIATRICS	25	164,915					
2		INTENSIVE CARE UNIT	26	103,901					
3		OTHER ADMINISTRATIVE AND GENERAL	6.04		808				
4 CAFETERIA	H	DIETARY	11	419,930					
5		DIETARY	11		569,403				
6 INTEREST	I	OTHER ADMINISTRATIVE AND GENERAL	6.04		9,986,488			11	
7 MOB LEASE	J	NEW CAP REL COSTS-MVBLE EQUIP	4		221,151			9	
8 NURSERY	K	ADULTS & PEDIATRICS	25	489,919	55,826				
9 PACU	L	RECOVERY ROOM	38	16,337	1,301				
10 DEPRECIATION	M	DATA PROCESSING	6.02		48			9	
11		OTHER ADMINISTRATIVE AND GENERAL	6.04		8,652,569			9	
12		PHARMACY	16		1,401			9	
13		OPERATING ROOM	37		2,262			9	
14 LEASE EXPENSE	N	DATA PROCESSING	6.02		155,549			10	
15		PURCHASING, RECEIVING AND STORES	6.03		8,165			10	
16		OTHER ADMINISTRATIVE AND GENERAL	6.04		508,581			10	
17		OPERATION OF PLANT	8		2,475				
18		DIETARY	11		2,474				
19		NURSING ADMINISTRATION	14		730				
20		PHARMACY	16		414,802				
21		SOCIAL SERVICE	18		2,662				
22		ADULTS & PEDIATRICS	25		113,934				
23		OPERATING ROOM	37		233,992				
24		RADIOLOGY-DIAGNOSTIC	41		301,748				
25		RADIOLOGY-THERAPEUTIC	42		4,478				
26		LABORATORY	44		50,473				
27		PHYSICAL THERAPY	50		138,069				
28		ELECTROCARDIOLOGY	53		776				
29		ASC (NON-DISTINCT PART)	58.01		3,151				
30		CARDIAC REHABILITATION	59.97		29,713				
31		SLEEP LAB	60.02		32,341				
32		EMERGENCY	61		11,678				
33		GIFT, FLOWER, COFFEE SHOP & CANTEEN	96		27,259				
34		RETAIL PHARMACY	98.01		31,702				
36 TOTAL RECLASSIFICATIONS				1,195,002	39,736,097				

(1) A letter (A, B, etc) must be entered on each line to identify each reclassification entry. Transfer the amounts in columns 4, 5, 8, and 9 to Worksheet A, column 4, lines as appropriate. See instructions for column 10 referencing to Worksheet A-7, Part III, columns 9 through 14.

RECLASSIFICATIONS

PROVIDER NO:  
150158

PERIOD:  
FROM 1/ 1/2010  
TO 12/31/2010

PREPARED 6/20/2011  
WORKSHEET A-6  
NOT A CMS WORKSHEET

RECLASS CODE: A  
EXPLANATION : NON BILLABLE MEDICAL SUPPLIES

----- INCREASE -----				----- DECREASE -----			
LINE	COST CENTER	LINE	AMOUNT	COST CENTER	LINE	AMOUNT	
1.00	OTHER ADMINISTRATIVE AND GENER	6.04	5,425	EMPLOYEE BENEFITS	5	88	
2.00	CENTRAL SERVICES & SUPPLY	15	5,225,458	DATA PROCESSING	6.02	2	
3.00			0	PURCHASING, RECEIVING AND STOR	6.03	893	
4.00			0	NURSING ADMINISTRATION	14	924	
5.00			0	MAINTENANCE & REPAIRS	7	972	
6.00			0	OPERATION OF PLANT	8	91	
7.00			0	HOUSEKEEPING	10	19,701	
8.00			0	DIETARY	11	4,118	
9.00			0	PHARMACY	16	70,944	
10.00			0	ADULTS & PEDIATRICS	25	1,135,393	
11.00			0	INTENSIVE CARE UNIT	26	212,038	
12.00			0	NURSERY	33	38,554	
13.00			0	OPERATING ROOM	37	2,030,590	
14.00			0	RECOVERY ROOM	38	92,826	
15.00			0	RADIOLOGY-DIAGNOSTIC	41	253,663	
16.00			0	RADIOLOGY-THERAPEUTIC	42	16,201	
17.00			0	LABORATORY	44	476,968	
18.00			0	RESPIRATORY THERAPY	49	74,541	
19.00			0	PHYSICAL THERAPY	50	44,417	
20.00			0	OCCUPATIONAL THERAPY	51	2,370	
21.00			0	SPEECH PATHOLOGY	52	2,952	
22.00			0	ELECTROCARDIOLOGY	53	21,124	
23.00			0	ASC (NON-DISTINCT PART)	58.01	116,070	
24.00			0	CARDIAC REHABILITATION	59.97	1,826	
25.00			0	SLEEP LAB	60.02	41,251	
26.00			0	EMERGENCY	61	572,251	
27.00			0	RETAIL PHARMACY	98.01	114	
28.00			0	CENTRAL SERVICES & SUPPLY	15	1	
TOTAL RECLASSIFICATIONS FOR CODE A			5,230,883	TOTAL RECLASSIFICATIONS FOR CODE A			5,230,883

RECLASS CODE: B  
EXPLANATION : BILLABLE IMPLANT SUPPLIES

----- INCREASE -----				----- DECREASE -----			
LINE	COST CENTER	LINE	AMOUNT	COST CENTER	LINE	AMOUNT	
1.00	OTHER ADMINISTRATIVE AND GENER	6.04	55,417	ADULTS & PEDIATRICS	25	4,134	
2.00	IMPL. DEV. CHARGED TO PATIENT	55.30	3,804,838	OPERATING ROOM	37	3,846,506	
3.00			0	ASC (NON-DISTINCT PART)	58.01	9,615	
TOTAL RECLASSIFICATIONS FOR CODE B			3,860,255	TOTAL RECLASSIFICATIONS FOR CODE B			3,860,255

RECLASS CODE: C  
EXPLANATION : BILLABLE MEDICAL SUPPLIES

----- INCREASE -----				----- DECREASE -----			
LINE	COST CENTER	LINE	AMOUNT	COST CENTER	LINE	AMOUNT	
1.00	HOUSEKEEPING	10	13	PURCHASING, RECEIVING AND STOR	6.03	360	
2.00	DIETARY	11	10	OTHER ADMINISTRATIVE AND GENER	6.04	74,029	
3.00	NURSING ADMINISTRATION	14	1,313	INTENSIVE CARE UNIT	26	30,470	
4.00	CENTRAL SERVICES & SUPPLY	15	6,117	NURSERY	33	298	
5.00	PHARMACY	16	698	OPERATING ROOM	37	851,843	
6.00	ADULTS & PEDIATRICS	25	2,131	RADIOLOGY-DIAGNOSTIC	41	321,566	
7.00	RECOVERY ROOM	38	419	RADIOLOGY-THERAPEUTIC	42	3	
8.00	ELECTROCARDIOLOGY	53	4,082	LABORATORY	44	151	
9.00	RETAIL PHARMACY	98.01	538	RESPIRATORY THERAPY	49	8,782	
10.00	MEDICAL SUPPLIES CHARGED TO PA	55	1,903,905	PHYSICAL THERAPY	50	315	
11.00	SLEEP LAB	60.02	1	OCCUPATIONAL THERAPY	51	1,844	
12.00			0	ASC (NON-DISTINCT PART)	58.01	625,254	
13.00			0	CARDIAC REHABILITATION	59.97	247	
14.00			0	EMERGENCY	61	4,065	
TOTAL RECLASSIFICATIONS FOR CODE C			1,919,227	TOTAL RECLASSIFICATIONS FOR CODE C			1,919,227

RECLASS CODE: D  
EXPLANATION : PTO

----- INCREASE -----				----- DECREASE -----			
LINE	COST CENTER	LINE	AMOUNT	COST CENTER	LINE	AMOUNT	
1.00	EMPLOYEE BENEFITS	5	552,611	DATA PROCESSING	6.02	17,110	
2.00	CENTRAL SERVICES & SUPPLY	15	569	PURCHASING, RECEIVING AND STOR	6.03	3,698	
3.00	SOCIAL SERVICE	18	5,908	OTHER ADMINISTRATIVE AND GENER	6.04	250,070	
4.00			0	MAINTENANCE & REPAIRS	7	4,736	
5.00			0	HOUSEKEEPING	10	3,689	

RECLASSIFICATIONS

PROVIDER NO:  
150158

PERIOD:  
FROM 1/1/2010  
TO 12/31/2010

PREPARED 6/20/2011  
WORKSHEET A-6  
NOT A CMS WORKSHEET

RECLASS CODE: D  
EXPLANATION : PTO

----- INCREASE -----				----- DECREASE -----			
LINE	COST CENTER	LINE	AMOUNT	COST CENTER	LINE	AMOUNT	
6.00			0	DIETARY	11	1,009	
7.00			0	NURSING ADMINISTRATION	14	20,898	
8.00			0	PHARMACY	16	18,022	
9.00			0	ADULTS & PEDIATRICS	25	93,119	
10.00			0	INTENSIVE CARE UNIT	26	10,809	
11.00			0	NURSERY	33	1,587	
12.00			0	OPERATING ROOM	37	14,582	
13.00			0	RECOVERY ROOM	38	6,580	
14.00			0	RADIOLOGY-DIAGNOSTIC	41	15,227	
15.00			0	RADIOLOGY-THERAPEUTIC	42	6,732	
16.00			0	LABORATORY	44	14,571	
17.00			0	RESPIRATORY THERAPY	49	19,257	
18.00			0	PHYSICAL THERAPY	50	15,316	
19.00			0	OCCUPATIONAL THERAPY	51	4,367	
20.00			0	SPEECH PATHOLOGY	52	2,169	
21.00			0	ELECTROCARDIOLOGY	53	2,581	
22.00			0	ASC (NON-DISTINCT PART)	58.01	11,526	
23.00			0	CARDIAC REHABILITATION	59.97	2,452	
24.00			0	SLEEP LAB	60.02	4,493	
25.00			0	EMERGENCY	61	4,032	
26.00			0	GI FT, FLOWER, COFFEE SHOP & CA	96	820	
27.00			0	RETAIL PHARMACY	98.01	5,364	
28.00			0	MARKETING	98.02	4,272	
TOTAL RECLASSIFICATIONS FOR CODE D			559,088				559,088

RECLASS CODE: E  
EXPLANATION : EMPLOYEE BENEFITS

----- INCREASE -----				----- DECREASE -----			
LINE	COST CENTER	LINE	AMOUNT	COST CENTER	LINE	AMOUNT	
1.00	EMPLOYEE BENEFITS	5	6,591,568	DATA PROCESSING	6.02	20,717	
2.00			0	PURCHASING, RECEIVING AND STOR	6.03	32,850	
3.00			0	OTHER ADMINISTRATIVE AND GENER	6.04	305,510	
4.00			0	MAINTENANCE & REPAIRS	7	97,763	
5.00			0	HOUSEKEEPING	10	136,688	
6.00			0	DIETARY	11	152,891	
7.00			0	NURSING ADMINISTRATION	14	238,030	
8.00			0	CENTRAL SERVICES & SUPPLY	15	35,355	
9.00			0	PHARMACY	16	282,938	
10.00			0	SOCIAL SERVICE	18	25,566	
11.00			0	ADULTS & PEDIATRICS	25	1,968,511	
12.00			0	INTENSIVE CARE UNIT	26	480,713	
13.00			0	NURSERY	33	172,978	
14.00			0	OPERATING ROOM	37	330,657	
15.00			0	RECOVERY ROOM	38	253,857	
16.00			0	RADIOLOGY-DIAGNOSTIC	41	461,080	
17.00			0	RADIOLOGY-THERAPEUTIC	42	121,181	
18.00			0	LABORATORY	44	167,489	
19.00			0	RESPIRATORY THERAPY	49	169,026	
20.00			0	PHYSICAL THERAPY	50	189,566	
21.00			0	OCCUPATIONAL THERAPY	51	35,084	
22.00			0	SPEECH PATHOLOGY	52	10,710	
23.00			0	ELECTROCARDIOLOGY	53	77,028	
24.00			0	ASC (NON-DISTINCT PART)	58.01	57,415	
25.00			0	CARDIAC REHABILITATION	59.97	7,089	
26.00			0	SLEEP LAB	60.02	82,344	
27.00			0	EMERGENCY	61	585,737	
28.00			0	GI FT, FLOWER, COFFEE SHOP & CA	96	13,041	
29.00			0	RETAIL PHARMACY	98.01	48,486	
30.00			0	MARKETING	98.02	31,268	
TOTAL RECLASSIFICATIONS FOR CODE E			6,591,568				6,591,568

RECLASS CODE: F  
EXPLANATION : TELEPHONE EQUIPMENT

----- INCREASE -----				----- DECREASE -----			
LINE	COST CENTER	LINE	AMOUNT	COST CENTER	LINE	AMOUNT	
1.00	NONPATIENT TELEPHONES	6.01	9,067	OTHER ADMINISTRATIVE AND GENER	6.04	8,474	
2.00			0	RADIOLOGY-DIAGNOSTIC	41	593	
TOTAL RECLASSIFICATIONS FOR CODE F			9,067				9,067

RECLASS CODE: G  
EXPLANATION : CONTRACT LABOR

----- INCREASE -----				----- DECREASE -----			
LINE	COST CENTER	LINE	AMOUNT	COST CENTER	LINE	AMOUNT	
1.00	OTHER ADMINISTRATIVE AND GENER	6.04	808	ADULTS & PEDIATRICS	25	164,915	

RECLASSIFICATIONS

PROVIDER NO:  
150158

PERIOD:  
FROM 1/ 1/2010  
TO 12/31/2010

PREPARED 6/20/2011  
WORKSHEET A-6  
NOT A CMS WORKSHEET

RECLASS CODE: G  
EXPLANATION : CONTRACT LABOR

----- INCREASE -----			
LINE	COST CENTER	LINE	AMOUNT
2.00	ADULTS & PEDIATRICS	25	164,915
3.00	INTENSIVE CARE UNIT	26	103,901
TOTAL RECLASSIFICATIONS FOR CODE G			269,624

----- DECREASE -----			
COST CENTER	LINE	AMOUNT	
INTENSIVE CARE UNIT	26	103,901	
OTHER ADMINISTRATIVE AND GENER	6.04	808	
		269,624	

RECLASS CODE: H  
EXPLANATION : CAFETERIA

----- INCREASE -----			
LINE	COST CENTER	LINE	AMOUNT
1.00	CAFETERIA	12	419,930
2.00	CAFETERIA	12	569,403
TOTAL RECLASSIFICATIONS FOR CODE H			989,333

----- DECREASE -----			
COST CENTER	LINE	AMOUNT	
DIETARY	11	419,930	
DIETARY	11	569,403	
		989,333	

RECLASS CODE: I  
EXPLANATION : INTEREST

----- INCREASE -----			
LINE	COST CENTER	LINE	AMOUNT
1.00	INTEREST	3.02	9,986,488
TOTAL RECLASSIFICATIONS FOR CODE I			9,986,488

----- DECREASE -----			
COST CENTER	LINE	AMOUNT	
OTHER ADMINISTRATIVE AND GENER	6.04	9,986,488	
		9,986,488	

RECLASS CODE: J  
EXPLANATION : MOB LEASE

----- INCREASE -----			
LINE	COST CENTER	LINE	AMOUNT
1.00	MOB	3.01	221,151
TOTAL RECLASSIFICATIONS FOR CODE J			221,151

----- DECREASE -----			
COST CENTER	LINE	AMOUNT	
NEW CAP REL COSTS-MVBLE EQUIP	4	221,151	
		221,151	

RECLASS CODE: K  
EXPLANATION : NURSERY

----- INCREASE -----			
LINE	COST CENTER	LINE	AMOUNT
1.00	NURSERY	33	545,745
TOTAL RECLASSIFICATIONS FOR CODE K			545,745

----- DECREASE -----			
COST CENTER	LINE	AMOUNT	
ADULTS & PEDIATRICS	25	545,745	
		545,745	

RECLASS CODE: L  
EXPLANATION : PACU

----- INCREASE -----			
LINE	COST CENTER	LINE	AMOUNT
1.00	ADULTS & PEDIATRICS	25	17,638
TOTAL RECLASSIFICATIONS FOR CODE L			17,638

----- DECREASE -----			
COST CENTER	LINE	AMOUNT	
RECOVERY ROOM	38	17,638	
		17,638	

RECLASS CODE: M  
EXPLANATION : DEPRECIATION

----- INCREASE -----			
LINE	COST CENTER	LINE	AMOUNT
1.00	NEW CAP REL COSTS-BLDG & FIXT	3	3,830,525
2.00	NEW CAP REL COSTS-MVBLE EQUIP	4	4,825,755
3.00			0
4.00			0
TOTAL RECLASSIFICATIONS FOR CODE M			8,656,280

----- DECREASE -----			
COST CENTER	LINE	AMOUNT	
DATA PROCESSING	6.02	48	
OTHER ADMINISTRATIVE AND GENER	6.04	8,652,569	
PHARMACY	16	1,401	
OPERATING ROOM	37	2,262	
		8,656,280	

RECLASS CODE: N  
EXPLANATION : LEASE EXPENSE

----- INCREASE -----			
LINE	COST CENTER	LINE	AMOUNT
1.00	NEW CAP REL COSTS-MVBLE EQUIP	4	2,074,752
2.00			0
3.00			0
4.00			0
5.00			0
6.00			0

----- DECREASE -----			
COST CENTER	LINE	AMOUNT	
DATA PROCESSING	6.02	155,549	
PURCHASING, RECEIVING AND STOR	6.03	8,165	
OTHER ADMINISTRATIVE AND GENER	6.04	508,581	
OPERATION OF PLANT	8	2,475	
DIETARY	11	2,474	
NURSING ADMINISTRATION	14	730	

RECLASSIFICATIONS

PROVIDER NO: 150158	PERIOD: FROM 1/ 1/2010 TO 12/31/2010	PREPARED 6/20/2011 WORKSHEET A-6 NOT A CMS WORKSHEET
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RECLASS CODE: N  
EXPLANATION : LEASE EXPENSE

----- INCREASE -----		----- DECREASE -----	
LINE	COST CENTER	LINE	AMOUNT
7.00		16	414,802
8.00		18	2,662
9.00		25	113,934
10.00		37	233,992
11.00		41	301,748
12.00		42	4,478
13.00		44	50,473
14.00		50	138,069
15.00		53	776
16.00		58.01	3,151
17.00		59.97	29,713
18.00		60.02	32,341
19.00		61	11,678
20.00		96	27,259
21.00		98.01	31,702
TOTAL RECLASSIFICATIONS FOR CODE N			2,074,752

PART I - ANALYSIS OF CHANGES IN OLD CAPITAL ASSET BALANCES

DESCRIPTION	BEGINNING BALANCES 1	PURCHASES 2	ACQUISITIONS DONATION 3	TOTAL 4	DI SPOSALS AND RETIREMENTS 5	ENDING BALANCE 6	FULLY DEPRECIATED ASSETS 7
1 LAND							
2 LAND IMPROVEMENTS							
3 BUILDINGS & FIXTURE							
4 BUILDING IMPROVEMENT							
5 FIXED EQUIPMENT							
6 MOVABLE EQUIPMENT							
7 SUBTOTAL							
8 RECONCILING ITEMS							
9 TOTAL							

PART II - ANALYSIS OF CHANGES IN NEW CAPITAL ASSET BALANCES

DESCRIPTION	BEGINNING BALANCES 1	PURCHASES 2	ACQUISITIONS DONATION 3	TOTAL 4	DI SPOSALS AND RETIREMENTS 5	ENDING BALANCE 6	FULLY DEPRECIATED ASSETS 7
1 LAND							
2 LAND IMPROVEMENTS	6,313,155					6,313,155	
3 BUILDINGS & FIXTURE	74,583,262					74,583,262	
4 BUILDING IMPROVEMENT	22,906,693	899,743		899,743		23,806,436	
5 FIXED EQUIPMENT	12,628,223	3,050		3,050		12,631,273	
6 MOVABLE EQUIPMENT	46,710,728	1,146,826		1,146,826	8,995	47,848,559	
7 SUBTOTAL	163,142,061	2,049,619		2,049,619	8,995	165,182,685	
8 RECONCILING ITEMS							
9 TOTAL	163,142,061	2,049,619		2,049,619	8,995	165,182,685	

PART III - RECONCILIATION OF CAPITAL COST CENTERS  
 DESCRIPTION

*	DESCRIPTION	COMPUTATION OF RATIOS			RATIO	ALLOCATION OF OTHER CAPITAL			TOTAL
		GROSS ASSETS 1	CAPITALIZED LEASES 2	GROSS ASSETS FOR RATIO 3		INSURANCE 5	TAXES 6	OTHER CAPITAL RELATED COSTS 7	
1	OLD CAP REL COSTS-BL								
2	OLD CAP REL COSTS-MV								
3	NEW CAP REL COSTS-BL								
3 01	MOB								
3 02	INTEREST								
4	NEW CAP REL COSTS-MV								
5	TOTAL				1.000000				

DESCRIPTION SUMMARY OF OLD AND NEW CAPITAL

*	DESCRIPTION	SUMMARY OF OLD AND NEW CAPITAL					OTHER CAPITAL RELATED COST 14	TOTAL (1) 15
		DEPRECIATION 9	LEASE 10	INTEREST 11	INSURANCE 12	TAXES 13		
1	OLD CAP REL COSTS-BL							
2	OLD CAP REL COSTS-MV							
3	NEW CAP REL COSTS-BL	4,166,530					4,166,530	
3 01	MOB	193,604	251,850				445,454	
3 02	INTEREST			9,986,000			9,986,000	
4	NEW CAP REL COSTS-MV	5,263,479	2,074,752				7,338,231	
5	TOTAL	9,623,613	2,326,602	9,986,000			21,936,215	

PART IV - RECONCILIATION OF AMOUNTS FROM WORKSHEET A, COLUMN 2, LINES 1 THRU 4  
 DESCRIPTION SUMMARY OF OLD AND NEW CAPITAL

*	DESCRIPTION	SUMMARY OF OLD AND NEW CAPITAL					OTHER CAPITAL RELATED COST 14	TOTAL (1) 15
		DEPRECIATION 9	LEASE 10	INTEREST 11	INSURANCE 12	TAXES 13		
1	OLD CAP REL COSTS-BL							
2	OLD CAP REL COSTS-MV							
3	NEW CAP REL COSTS-BL							
3 01	MOB		467,524				467,524	
3 02	INTEREST							
4	NEW CAP REL COSTS-MV							
5	TOTAL		467,524				467,524	

\* All lines numbers except line 5 are to be consistent with Workshseet A line numbers for capital cost centers.  
 (1) The amounts on lines 1 thru 4 must equal the corresponding amounts on Worksheet A, column 7, lines 1 thru 4. Columns 9 through 14 should include related Worksheet A-6 reclassifications and Worksheet A-8 adjustments. (See instructions).

ADJUSTMENTS TO EXPENSES

PROVIDER NO: 15-0158

PERIOD: FROM 1/1/2010 TO 12/31/2010  
PREPARED 6/20/2011  
WORKSHEET A-8

DESCRPTION (1)	(2) BASIS/CODE 1	AMOUNT 2	EXPENSE CLASSIFICATION ON WORKSHEET A TO/FROM WHICH THE AMOUNT IS TO BE ADJUSTED		WKST. A-7 REF. 5
			COST CENTER 3	LINE NO 4	
1 INVST INCOME-OLD BLDGS AND FIXTURES			OLD CAP REL COSTS-BLDG &	1	
2 INVESTMENT INCOME-OLD MOVABLE EQUIP			OLD CAP REL COSTS-MVBLE E	2	
3 INVST INCOME-NEW BLDGS AND FIXTURES			NEW CAP REL COSTS-BLDG &	3	
4 INVESTMENT INCOME-NEW MOVABLE EQUIP			NEW CAP REL COSTS-MVBLE E	4	
5 INVESTMENT INCOME-OTHER					
6 TRADE, QUANTITY AND TIME DISCOUNTS					
7 REFUNDS AND REBATES OF EXPENSES					
8 RENTAL OF PRVIDER SPACE BY SUPPLIERS					
9 TELEPHONE SERVICES					
10 TELEVISION AND RADIO SERVICE					
11 PARKING LOT					
12 PROVIDER BASED PHYSICIAN ADJUSTMENT	A-8-2	-7,867,092			
13 SALE OF SCRAP, WASTE, ETC.					
14 RELATED ORGANIZATION TRANSACTIONS	A-8-1	13,896,075			
15 LAUNDRY AND LINEN SERVICE					
16 CAFETERIA--EMPLOYEES AND GUESTS					
17 RENTAL OF QTRS TO EMPLOYEE AND OTHRS					
18 SALE OF MED AND SURG SUPPLIES					
19 SALE OF DRUGS TO OTHER THAN PATIENTS					
20 SALE OF MEDICAL RECORDS & ABSTRACTS					
21 NURSG SCHOOL(TUITN, FEES, BOOKS, ETC.)					
22 VENDING MACHINES					
23 INCOME FROM IMPOSITION OF INTEREST					
24 INTRST EXP ON MEDICARE OVERPAYMENTS					
25 ADJUSTMENT FOR RESPIRATORY THERAPY	A-8-3/A-8-4		RESPIRATORY THERAPY	49	
26 ADJUSTMENT FOR PHYSICAL THERAPY	A-8-3/A-8-4		PHYSICAL THERAPY	50	
27 ADJUSTMENT FOR HHA PHYSICAL THERAPY	A-8-3				
28 UTILIZATION REVIEW-PHYSIAN COMP			UTILIZATION REVIEW-SNF	89	
29 DEPRECIATION-OLD BLDGS AND FIXTURES			OLD CAP REL COSTS-BLDG &	1	
30 DEPRECIATION-OLD MOVABLE EQUIP			OLD CAP REL COSTS-MVBLE E	2	
31 DEPRECIATION-NEW BLDGS AND FIXTURES			NEW CAP REL COSTS-BLDG &	3	
32 DEPRECIATION-NEW MOVABLE EQUIP			NEW CAP REL COSTS-MVBLE E	4	
33 NON-PHYSICIAN ANESTHETIST			NONPHYSICIAN ANESTHETISTS	20	
34 PHYSICIANS' ASSISTANT					
35 ADJUSTMENT FOR OCCUPATIONAL THERAPY	A-8-4		OCCUPATIONAL THERAPY	51	
36 ADJUSTMENT FOR SPEECH PATHOLOGY	A-8-4		SPEECH PATHOLOGY	52	
37 PTO EXPENSE	A	-556,919	EMPLOYEE BENEFITS	5	
38 EMPLOYEE BENEFITS	A	-6,724,779	EMPLOYEE BENEFITS	5	
39 NONPATIENT TELEPHONES	A	-10,167	NONPATIENT TELEPHONES	6.01	
40 MOB	A	-215,674	MOB	3.01	10
41 LOBBYING	A	-5,202	OTHER ADMINISTRATIVE AND	6.04	
42 MISC	B	-760	EMPLOYEE BENEFITS	5	
43 MISC	B	-185	PURCHASING, RECEIVING AND	6.03	
44 MISC	B	-187,833	OTHER ADMINISTRATIVE AND	6.04	
45 MISC	B	-115,808	MAINTENANCE & REPAIRS	7	
46 MISC	B	-698,186	CAFETERIA	12	
47 MISC	B	-43,778	NURSING ADMINISTRATION	14	
48 MISC	B	-1,362	PHARMACY	16	
49 MISC	B	-23,869	ADULTS & PEDIATRICS	25	
49.01 MISC	B	-96	OPERATING ROOM	37	
49.02 MISC	B	-160,458	PHYSICAL THERAPY	50	
49.03 MISC	B	-977	CARDIAC REHABILITATION	59.97	
50 TOTAL (SUM OF LINES 1 THRU 49)		-2,717,070			

(1) Description - all chapter references in this column pertain to CMS Pub. 15-1.

(2) Basis for adjustment (see instructions).

A. Costs - if cost, including applicable overhead, can be determined.

B. Amount Received - if cost cannot be determined.

(3) Additional adjustments may be made on lines 37 thru 49 and subscripts thereof.

Note: See instructions for column 5 referencing to Worksheet A-7

A. COSTS INCURRED AND ADJUSTMENTS REQUIRED AS A RESULT OF TRANSACTIONS WITH RELATED ORGANIZATIONS OR THE CLAIMING OF HOME OFFICE COSTS:

LINE NO.	COST CENTER	EXPENSE ITEMS	AMOUNT OF ALLOWABLE COST	AMOUNT	NET* ADJUSTMENTS	WKSHT A-7 COL. REF.	
1	2	3	4	5	6		
1	3	NEW CAP REL COSTS-BLDG &	BLDG & FIXT	336,005		336,005	9
2	3 1	MOB	MOB	193,604	221,151	-27,547	9
3	3 2	INTEREST	INTEREST	9,986,000	9,986,488	-488	11
4	4	NEW CAP REL COSTS-MVBLE E	MVBLE EQUIP	1,093,087	434,212	658,875	9
4.01	5	EMPLOYEE BENEFITS	EMPLOYEE BENEFITS	9,464,085	156,281	9,307,804	
4.02	6 1	NONPATIENT TELEPHONES	TELEPHONES	227,328		227,328	
4.03	6 2	DATA PROCESSING	DATA PROCESSING	4,931,244		4,931,244	
4.04	6 3	PURCHASING, RECEIVING AND	PURCHASING, RECEIVING & S	323,821		323,821	
4.05	6 4	OTHER ADMINISTRATIVE AND	OTHER ADMIN & GENERAL	10,497,958	10,984,218	-486,260	
4.06	7	MAINTENANCE & REPAIRS	MAINTENANCE & REPAIRS	158,805	97	158,708	
4.07	8	OPERATION OF PLANT	OPERATION OF PLANT	455,357	16,266	439,091	
4.08	10	HOUSEKEEPING	HOUSEKEEPING	114,301		114,301	
4.09	12	CAFETERIA	CAFETERIA	10,993		10,993	
4.10	14	NURSING ADMINISTRATION	NURSING ADMIN	260,169	468,137	-207,968	
4.11	25	ADULTS & PEDIATRICS	ADULTS & PEDIATRICS	126,563	133,225	-6,662	
4.12	26	INTENSIVE CARE UNIT	INTENSIVE CARE UNIT	176,902	186,213	-9,311	
4.13	33	NURSERY	NURSERY	5,324	5,605	-281	
4.14	41	RADIOLOGY-DIAGNOSTIC	RADIOLOGY-DIAGNOSTIC	9,205	302,510	-293,305	
4.15	42	RADIOLOGY-THERAPEUTIC	RADIOLOGY-THERAPEUTIC	10,030	166,332	-156,302	
4.16	44	LABORATORY	LABORATORY	2,088,926	3,004,629	-915,703	
4.17	50	PHYSICAL THERAPY	PHYSICAL THERAPY	659	2,957	-2,298	
4.18	53	ELECTROCARDIOLOGY	ELECTROCARDIOLOGY	9,483	380,585	-371,102	
4.19	58 1	ASC (NON-DISTINCT PART)	ASC (NON-DISTINCT PART)		4,581	-4,581	
4.20	60 2	SLEEP LAB	SLEEP LAB	256	57,830	-57,574	
4.21	61	EMERGENCY	EMERGENCY	1,428	74,141	-72,713	
5		TOTALS		40,481,533	26,585,458	13,896,075	

\* THE AMOUNTS ON LINES 1-4 AND SUBSCRIPTS AS APPROPRIATE ARE TRANSFERRED IN DETAIL TO WORKSHEET A, COLUMN 6, LINES AS APPROPRIATE. POSITIVE AMOUNTS INCREASE COST AND NEGATIVE AMOUNTS DECREASE COST. FOR RELATED ORGANIZATIONAL OR HOME OFFICE COST WHICH HAS NOT BEEN POSTED TO WORKSHEET A, COLUMNS 1 AND/OR 2, THE AMOUNT ALLOWABLE SHOULD BE IN COLUMN 4 OF THIS PART.

B. INTERRELATIONSHIP TO RELATED ORGANIZATION(S) AND/OR HOME OFFICE: THE SECRETARY, BY VIRTUE OF AUTHORITY GRANTED UNDER SECTION 1814(B)(1) OF THE SOCIAL SECURITY ACT, REQUIRES THAT YOU FURNISH THE INFORMATION REQUESTED UNDER PART B OF THIS WORKSHEET.

THIS INFORMATION IS USED BY THE CENTERS FOR MEDICARE & MEDICAID SERVICES AND ITS INTERMEDIARIES IN DETERMINING THAT THE COSTS APPLICABLE TO SERVICES, FACILITIES, AND SUPPLIES FURNISHED BY ORGANIZATIONS RELATED TO YOU BY COMMON OWNERSHIP OR CONTROL REPRESENT REASONABLE COSTS AS DETERMINED UNDER SECTION 1861 OF THE SOCIAL SECURITY ACT. IF YOU DO NOT PROVIDE ALL OR ANY PART OF THE REQUESTED INFORMATION, THE COST REPORT IS CONSIDERED INCOMPLETE AND NOT ACCEPTABLE FOR PURPOSES OF CLAIMING REIMBURSEMENT UNDER TITLE XVII.

SYMBOL (1)	NAME	PERCENTAGE OF OWNERSHIP	RELATED ORGANIZATION(S) AND/OR HOME OFFICE NAME	PERCENTAGE OF OWNERSHIP	TYPE OF BUSINESS	
1	2	3	4	5	6	
1	B	CLARIAN HEALTH PARTNERS	50.00	CLARIAN HEALTH PARTNERS	50.00	HEALTHCARE
2			0.00		0.00	
3			0.00		0.00	
4			0.00		0.00	
5			0.00		0.00	

- (1) USE THE FOLLOWING SYMBOLS TO INDICATE INTERRELATIONSHIP TO RELATED ORGANIZATIONS:
- A. INDIVIDUAL HAS FINANCIAL INTEREST (STOCKHOLDER, PARTNER, ETC.) IN BOTH RELATED ORGANIZATION AND IN PROVIDER.
  - B. CORPORATION, PARTNERSHIP OR OTHER ORGANIZATION HAS FINANCIAL INTEREST IN PROVIDER.
  - C. PROVIDER HAS FINANCIAL INTEREST IN CORPORATION, PARTNERSHIP OR OTHER ORGANIZATION.
  - D. DIRECTOR, OFFICER, ADMINISTRATOR OR KEY PERSON OF PROVIDER OR RELATIVE OF SUCH PERSON HAS A FINANCIAL INTEREST IN RELATED ORGANIZATION.
  - E. INDIVIDUAL IS DIRECTOR, OFFICER, ADMINISTRATOR OR KEY PERSON OF PROVIDER AND RELATED ORGANIZATION.
  - F. DIRECTOR, OFFICER, ADMINISTRATOR OR KEY PERSON OF RELATED ORGANIZATION OR RELATIVE OF SUCH PERSON HAS FINANCIAL INTEREST IN PROVIDER.
  - G. OTHER (FINANCIAL OR NON-FINANCIAL) SPECIFY.

PROVIDER BASED PHYSICIAN ADJUSTMENTS

PROVIDER NO: 15-0158  
 PERIOD: FROM 1/1/2010 TO 12/31/2010  
 PREPARED: 6/20/2011  
 WORKSHEET A-8-2  
 GROUP 1

WKSHT A LINE NO.	COST CENTER/ PHYSICIAN IDENTIFIER	TOTAL REMUN- ERATION	PROFES- SIONAL COMPONENT	PROVIDER COMPONENT	RCE AMOUNT	PHYSICIAN/ PROVIDER COMPONENT HOURS	UNADJUSTED RCE LIMIT	5 PERCENT OF UNADJUSTED RCE LIMIT
1	2	3	4	5	6	7	8	9
1 6 4	ADMIN & GENERAL	7,403,265	7,403,265					
2 25	ADULTS & PEDI	113,842	113,842					
3								
4 37	OPERATING ROOM	108,334	108,334					
5 41	RADIOLOGY DIAGNOSTIC	20,000	20,000					
6 42	RADIOLOGY THERAPY	80,000	80,000					
7 44	LAB	20,000	20,000					
8 50	PT	50,000	50,000					
9 58 1	CATH LAB	51	51					
10 60 2	SLEEP CLINIC	21,600	21,600					
11 61	EMER ROOM	50,000	50,000					
12								
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								
26								
27								
28								
29								
30								
101	TOTAL	7,867,092	7,867,092					



COST ALLOCATION STATISTICS

PROVIDER NO: 15-0158  
 PERIOD: FROM 1/1/2010 TO 12/31/2010  
 PREPARED 6/20/2011  
 NOT A CMS WORKSHEET

LINE NO.	COST CENTER DESCRIPTION	STATISTICS CODE	STATISTICS DESCRIPTION	
	GENERAL SERVICE COST			
1	OLD CAP REL COSTS-BLDG & FIXT	1	SQUARE FEET	NOT ENTERED
2	OLD CAP REL COSTS-MVBLE EQUIP	2	DOLLAR VALUE	NOT ENTERED
3	NEW CAP REL COSTS-BLDG & FIXT	3	SQUARE FEET	ENTERED
3.01	MOB	31	MOB SQUARE FEET	ENTERED
3.02	INTEREST	3	SQUARE FEET	ENTERED
4	NEW CAP REL COSTS-MVBLE EQUIP	4	DOLLAR VALUE	ENTERED
5	EMPLOYEE BENEFITS	5	GROSS SALARIES	ENTERED
6.01	NONPATIENT TELEPHONES	60	NUMBER OF PHONES	ENTERED
6.02	DATA PROCESSING	60	NUMBER OF PHONES	ENTERED
6.03	PURCHASING, RECEIVING AND STORES	63	PURCHASED REQ	ENTERED
6.04	OTHER ADMINISTRATIVE AND GENERAL	#	ACCUM. COST	NOT ENTERED
7	MAINTENANCE & REPAIRS	3	SQUARE FEET	ENTERED
8	OPERATION OF PLANT	3	SQUARE FEET	ENTERED
9	LAUNDRY & LINEN SERVICE	8	POUNDS OF LAUNDRY	ENTERED
10	HOUSEKEEPING	3	SQUARE FEET	ENTERED
11	DIETARY	10	PATIENT DAYS	ENTERED
12	CAFETERIA	11	FTES	ENTERED
13	MAINTENANCE OF PERSONNEL	12	NUMBER HOUSED	NOT ENTERED
14	NURSING ADMINISTRATION	13	DIRECT NURS FTES	ENTERED
15	CENTRAL SERVICES & SUPPLY	63	PURCHASED REQ	ENTERED
16	PHARMACY	15	COSTED REQUIS.	ENTERED
17	MEDICAL RECORDS & LIBRARY	16	TIME SPENT	NOT ENTERED
18	SOCIAL SERVICE	17	PATIENT DAYS	ENTERED
20	NONPHYSICIAN ANESTHETISTS	18	ASSIGNED TIME	NOT ENTERED
21	NURSING SCHOOL	19	ASSIGNED TIME	NOT ENTERED
22	I&R SERVICES-SALARY & FRINGES APPRVD	20	ASSIGNED TIME	NOT ENTERED
23	I&R SERVICES-OTHER PRGM COSTS APPRVD	21	ASSIGNED TIME	NOT ENTERED
24	PARAMED ED PRGM	22	ASSIGNED TIME	NOT ENTERED

COST CENTER DESCRIPTION	NET EXPENSES FOR COST ALLOCATION	OLD CAP REL C OSTS-BLDG &	OLD CAP REL C OSTS-MVBLE E	NEW CAP REL C OSTS-BLDG &	INTEREST	NEW CAP REL C OSTS-MVBLE E
	0	1	2	3	3.01 3.02	4
001 GENERAL SERVICE COST CNTR						
002 OLD CAP REL COSTS-BLDG &						
003 OLD CAP REL COSTS-MVBLE E						
003 01 NEW CAP REL COSTS-BLDG & MOB	4,166,530			4,166,530	445,454	
003 02 INTEREST	9,986,000					9,986,000
004 NEW CAP REL COSTS-MVBLE E	7,338,231					7,338,231
005 EMPLOYEE BENEFITS	9,982,362				58,536	
006 01 NONPATIENT TELEPHONES	296,021			24,056		486,283
006 02 DATA PROCESSING	5,130,111			27,522	12,930	237,862
006 03 PURCHASING, RECEIVING AND	593,331			55,384		828
006 04 OTHER ADMINISTRATIVE AND	9,000,371			155,205	75,691	69,679
007 MAINTENANCE & REPAIRS	3,440,697			796,276	17,294	666,953
008 OPERATION OF PLANT	754,380			40,984	2,172	493,830
009 LAUNDRY & LINEN SERVICE	477,719			13,045		4,562
010 HOUSEKEEPING	3,320,253			54,589	7,651	8,444
011 DIETARY	1,241,610			168,132	8,049	1,899
012 CAFETERIA	302,140					1,341
013 MAINTENANCE OF PERSONNEL						
014 NURSING ADMINISTRATION	2,205,135			22,336		6,627
015 CENTRAL SERVICES & SUPPLY	5,509,707			93,071		134,561
016 PHARMACY	4,950,507			32,044		6,514
017 MEDICAL RECORDS & LIBRARY						
018 SOCIAL SERVICE	167,154					
020 NONPHYSICIAN ANESTHETISTS						
021 NURSING SCHOOL						
022 I&R SERVICES-SALARY & FRI						
023 I&R SERVICES-OTHER PRGM C						
024 PARAMEDICAL PRGM						
025 INPAT ROUTINE SRVC CNTRS ADULTS & PEDIATRICS	13,191,803			1,086,448		1,521,671
026 INTENSIVE CARE UNIT	3,477,980			124,086		7,974
027 CORONARY CARE UNIT						
028 BURN INTENSIVE CARE UNIT						
029 SURGICAL INTENSIVE CARE U						
031 SUBPROVIDER						
033 NURSERY	1,739,546			41,479		214,903
034 SKILLED NURSING FACILITY						
035 NURSING FACILITY						
035 01 ICF/MR						
036 OTHER LONG TERM CARE						
037 ANCILLARY SRVC COST CNTRS						
038 OPERATING ROOM	2,427,690			377,587		996,476
038 RECOVERY ROOM	1,623,962			32,865		78,769
039 DELIVERY ROOM & LABOR ROO						
040 ANESTHESIOLOGY						
041 RADIOLOGY-DIAGNOSTIC	3,529,060			196,801		1,044,817
042 RADIOLOGY-THERAPEUTIC	959,834			127,709		850,140
043 RADIOISOTOPE						
044 LABORATORY	3,988,944			45,271		192,982
045 PBP CLINICAL LAB SERVICES						
046 WHOLE BLOOD & PACKED RED						
047 BLOOD STORING, PROCESSING						
048 INTRAVENOUS THERAPY						
049 RESPIRATORY THERAPY	1,242,256			10,894		54,669
050 PHYSICAL THERAPY	1,111,961			1,564	55,507	18,608
051 OCCUPATIONAL THERAPY	228,756			1,564	55,507	18,608
052 SPEECH PATHOLOGY	70,421			1,564	55,507	18,608
053 ELECTROCARDIOLOGY	520,257			32,748		131,509
054 ELECTROENCEPHALOGRAPHY						
055 MEDICAL SUPPLIES CHARGED	1,903,905					
055 30 IMPL. DEV. CHARGED TO PAT	3,804,838					
056 DRUGS CHARGED TO PATIENTS						
057 RENAL DIALYSIS						
058 ASC (NON-DISTINCT PART)						
058 01 ASC (NON-DISTINCT PART)	440,553			34,169		12,500
059 CARDIAC CATHETERIZATION L						
059 97 CARDIAC REHABILITATION	89,563				13,867	
060 OUTPAT SERVICE COST CNTRS						
060 01 CLINIC						
060 02 SLEEP LAB	595,717			2,085	22,075	22,251
061 EMERGENCY	4,078,610			258,519		108,405
062 OBSERVATION BEDS (NON-DIS						
062 OTHER REIMBURS COST CNTRS						
064 HOME PROGRAM DIALYSIS						
065 AMBULANCE SERVICES						
066 DURABLE MEDICAL EQUIP-REN						
067 DURABLE MEDICAL EQUIP-SOL						
069 CORF						
070 I&R SERVICES-NOT APPRVD P						
071 HOME HEALTH AGENCY						
082 LUNG ACQUISITION						
SPEC PURPOSE COST CENTERS						
083 KIDNEY ACQUISITION						

COST CENTER DESCRIPTION	NET EXPENSES FOR COST ALLOCATION	OLD CAP REL C	OLD CAP REL C	NEW CAP REL C	INTEREST		NEW CAP REL C
		OSTS-BLDG & 1	OSTS-MVBLE E 2	OSTS-BLDG & 3	3.01	3.02	OSTS-MVBLE E 4
SPEC PURPOSE COST CENTERS							
084 LIVER ACQUISITION							
085 HEART ACQUISITION							
085 01 PANCREAS ACQUISITION							
086 OTHER ORGAN ACQUISITION							
092 AMBULATORY SURGICAL CENTE							
093 HOSPICE							
095 SUBTOTALS	114,333,369			3,857,997	384,786	9,246,532	7,333,504
NONREIMBURS COST CENTERS							
096 GIFT, FLOWER, COFFEE SHOP	288,913				28,810		
097 RESEARCH							
098 PHYSICIANS' PRIVATE OFFIC							
098 01 RETAIL PHARMACY	2,397,419			305,249	19,187	731,597	4,727
098 02 MARKETING	1,538,929			3,284	12,671	7,871	
099 NONPAID WORKERS							
101 CROSS FOOT ADJUSTMENT							
102 NEGATIVE COST CENTER							
103 TOTAL	118,558,630			4,166,530	445,454	9,986,000	7,338,231

COST CENTER DESCRIPTION	EMPLOYEE BENEFITS	NONPATIENT TELEPHONES	DATA PROCESSING	PURCHASING, RECEIVING AND	SUBTOTAL	OTHER ADMINISTRATIVE AND	MAINTENANCE & REPAIRS
	5	6.01	6.02	6.03	6a.03	6.04	7
001 GENERAL SERVICE COST CNTR							
002 OLD CAP REL COSTS-BLDG &							
003 OLD CAP REL COSTS-MVBLE E							
003 NEW CAP REL COSTS-BLDG &							
003 01 MOB							
003 02 INTEREST							
004 NEW CAP REL COSTS-MVBLE E							
005 EMPLOYEE BENEFITS	10,040,898						
006 01 NONPATIENT TELEPHONES		864,016					
006 02 DATA PROCESSING	35,645	8,090	5,518,124				
006 03 PURCHASING, RECEIVING AND	50,164	6,472	41,725	880,643			
006 04 OTHER ADMINISTRATIVE AND	453,356	105,170	678,030		10,909,485	10,909,485	
007 MAINTENANCE & REPAIRS	143,732	39,641	255,565	78	7,268,685	736,630	8,005,315
008 OPERATION OF PLANT		35,596	229,487	7	1,654,683	167,691	105,560
009 LAUNDRY & LINEN SERVICE					526,590	53,366	33,598
010 HOUSEKEEPING	225,631	6,472	41,725	1,572	3,797,171	384,817	140,601
011 DIETARY	144,319	16,989	109,528	192	2,093,684	212,180	433,048
012 CAFETERIA	102,006			136	405,623	41,107	
013 MAINTENANCE OF PERSONNEL							
014 NURSING ADMINISTRATION	375,955	9,708	62,587		2,735,881	277,262	57,529
015 CENTRAL SERVICES & SUPPLY	56,255	2,427	15,647		6,034,733	611,578	239,717
016 PHARMACY	427,497	16,180	104,312	5,607	5,619,462	569,493	82,535
017 MEDICAL RECORDS & LIBRARY							
018 SOCIAL SERVICE	37,593	4,045	26,078		234,870	23,802	
020 NONPHYSICIAN ANESTHETISTS							
021 NURSING SCHOOL							
022 I&R SERVICES-SALARY & FRI							
023 I&R SERVICES-OTHER PRGM C							
024 PARAMED ED PRGM							
025 INPAT ROUTINE SRVC CNTRS	2,871,905	228,141	1,470,805	79,567	23,054,249	2,336,385	2,798,300
026 ADULTS & PEDIATRICS	716,080			19,358	4,642,877	470,523	319,600
027 INTENSIVE CARE UNIT							
028 CORONARY CARE UNIT							
029 BURN INTENSIVE CARE UNIT							
031 SURGICAL INTENSIVE CARE U							
033 SUBPROVIDER	386,397	3,236	20,862	14,338	2,520,175	255,402	106,836
034 NURSERY							
034 SKILLED NURSING FACILITY							
035 NURSING FACILITY							
035 01 ICF/MR							
036 OTHER LONG TERM CARE							
037 ANCILLARY SRVC COST CNTRS							
038 OPERATING ROOM	485,153	72,810	469,406	531,166	6,265,258	634,940	972,529
038 RECOVERY ROOM	365,266	4,854	31,294	7,376	2,144,386	217,319	84,649
039 DELIVERY ROOM & LABOR ROO							
040 ANESTHESIOLOGY							
041 RADIOLOGY-DIAGNOSTIC	721,836	57,439	370,309	51,135	6,443,075	652,961	506,890
042 RADIOLOGY-THERAPEUTIC	179,018	25,079	161,684	1,319	2,610,864	264,593	328,931
043 RADIOISOTOPE							
044 LABORATORY	261,954	32,360	208,625	47,183	4,885,822	495,144	116,603
045 PBP CLINICAL LAB SERVICES							
046 WHOLE BLOOD & PACKED RED							
047 BLOOD STORING, PROCESSING							
048 INTRAVENOUS THERAPY							
049 RESPIRATORY THERAPY	263,880	1,618	10,431	6,658	1,616,517	163,823	28,060
050 PHYSICAL THERAPY	279,118	30,742	198,193	3,579	1,703,020	172,589	4,028
051 OCCUPATIONAL THERAPY	50,471	1,618	10,431	336	371,039	37,602	4,028
052 SPEECH PATHOLOGY	15,756			238	165,842	16,807	4,028
053 ELECTROCARDIOLOGY	113,502	4,045	26,078	1,360	907,987	92,018	84,347
054 ELECTROENCEPHALOGRAPHY							
055 MEDICAL SUPPLIES CHARGED					1,903,905	192,947	
055 30 IMPL. DEV. CHARGED TO PAT					3,804,838	385,594	
056 DRUGS CHARGED TO PATIENTS							
057 RENAL DIALYSIS							
058 ASC (NON-DISTINCT PART)							
058 01 ASC (NON-DISTINCT PART)	85,566	7,281	46,941	59,951	768,853	77,918	88,006
059 CARDIAC CATHETERIZATION L							
059 97 CARDIAC REHABILITATION	13,439	2,427	15,647	165	135,108	13,692	
060 OUTPAT SERVICE COST CNTRS							
060 CLINIC							
060 01 CLINIC							
060 02 SLEEP LAB	126,356	7,281	46,941	3,319	831,022	84,218	5,370
061 EMERGENCY	908,865	110,025	709,324	46,003	6,839,347	693,120	665,851
062 OBSERVATION BEDS (NON-DIS							
062 OTHER REIMBURS COST CNTRS							
064 HOME PROGRAM DIALYSIS							
065 AMBULANCE SERVICES							
066 DURABLE MEDICAL EQUIP-REN							
067 DURABLE MEDICAL EQUIP-SOL							
069 CORF							
070 I&R SERVICES-NOT APPRVD P							
071 HOME HEALTH AGENCY							
082 LUNG ACQUISITION							
SPEC PURPOSE COST CENTERS							
083 KIDNEY ACQUISITION							

COST CENTER DESCRIPTION	EMPLOYEE BENEFITS	NONPATIENT TELEPHONES	TELE DATA	PROCESSING	PURCHASING, RECEIVING AND	SUBTOTAL	OTHER ADMINISTRATIVE	MAINTENANCE & REPAIRS
	5	6.01		6.02	6.03	6a.03	6.04	7
084 SPEC PURPOSE COST CENTERS								
085 LIVER ACQUISITION								
085 HEART ACQUISITION								
085 01 PANCREAS ACQUISITION								
086 OTHER ORGAN ACQUISITION								
092 AMBULATORY SURGICAL CENTER								
093 HOSPICE								
095 SUBTOTALS	9,896,715	839,746		5,361,655	880,643	112,895,051	10,335,521	7,210,644
096 NONREIMBURS COST CENTERS								
097 GIFT, FLOWER, COFFEE SHOP	20,891	4,854		31,294		374,762	37,980	
098 RESEARCH								
098 PHYSICIANS' PRIVATE OFFICE								
098 01 RETAIL PHARMACY	79,443	12,944		83,450		3,634,016	368,282	786,213
098 02 MARKETING	43,849	6,472		41,725		1,654,801	167,702	8,458
099 NONPAID WORKERS								
101 CROSS FOOT ADJUSTMENT								
102 NEGATIVE COST CENTER								
103 TOTAL	10,040,898	864,016		5,518,124	880,643	118,558,630	10,909,485	8,005,315

COST CENTER DESCRIPTION	OPERATION OF PLANT	LAUNDRY & LINEN SERVICE	HOUSEKEEPING	DIETARY	CAFETERIA	MAINTENANCE OF PERSONNEL	NURSING ADMINISTRATION
	8	9	10	11	12	13	14
001 GENERAL SERVICE COST CNTR							
002 OLD CAP REL COSTS-BLDG &							
003 OLD CAP REL COSTS-MVBLE E							
003 NEW CAP REL COSTS-BLDG &							
003 01 MOB							
003 02 INTEREST							
004 NEW CAP REL COSTS-MVBLE E							
005 EMPLOYEE BENEFITS							
006 01 NONPATIENT TELEPHONES							
006 02 DATA PROCESSING							
006 03 PURCHASING, RECEIVING AND							
006 04 OTHER ADMINISTRATIVE AND							
007 MAINTENANCE & REPAIRS							
008 OPERATION OF PLANT	1,927,934						
009 LAUNDRY & LINEN SERVICE	8,200	621,754					
010 HOUSEKEEPING	34,314		4,356,903				
011 DIETARY	105,685		244,222	3,088,819			
012 CAFETERIA					446,730		
013 MAINTENANCE OF PERSONNEL							
014 NURSING ADMINISTRATION	14,040		32,444		14,051		3,131,207
015 CENTRAL SERVICES & SUPPLY	58,503		135,191		4,709		
016 PHARMACY	20,143	115	46,546		18,392		
017 MEDICAL RECORDS & LIBRARY							
018 SOCIAL SERVICE					1,876		23,646
020 NONPHYSICIAN ANESTHETISTS							
021 NURSING SCHOOL							
022 I&R SERVICES-SALARY & FRI							
023 I&R SERVICES-OTHER PRGM C							
024 PARAMED ED PRGM							
025 INPAT ROUTINE SRVC CNTRS							
025 ADULTS & PEDIATRICS	682,923	309,755	1,578,129	2,271,589	149,743		1,887,430
026 INTENSIVE CARE UNIT	77,998		180,242	460,760	33,239		418,968
027 CORONARY CARE UNIT							
028 BURN INTENSIVE CARE UNIT							
029 SURGICAL INTENSIVE CARE U							
031 SUBPROVIDER							
033 NURSERY	26,073	13,989	60,251	356,470	16,287		205,285
034 SKILLED NURSING FACILITY							
035 NURSING FACILITY							
035 01 ICF/MR							
036 OTHER LONG TERM CARE							
037 ANCILLARY SRVC COST CNTRS							
037 OPERATING ROOM	237,346	87,091	548,467		25,460		
038 RECOVERY ROOM	20,659		47,739		17,987		
039 DELIVERY ROOM & LABOR ROO							
040 ANESTHESIOLOGY							
041 RADIOLOGY-DIAGNOSTIC	123,706	33,143	285,866		38,217		
042 RADIOLOGY-THERAPEUTIC	80,276	7,399	185,504		8,300		
043 RADIOISOTOPE							
044 LABORATORY	28,457		65,759		14,885		
045 PBP CLINICAL LAB SERVICES							
046 WHOLE BLOOD & PACKED RED							
047 BLOOD STORING, PROCESSING							
048 INTRAVENOUS THERAPY							
049 RESPIRATORY THERAPY	6,848		15,825		13,009		
050 PHYSICAL THERAPY	983	4,656	2,271		13,775		
051 OCCUPATIONAL THERAPY	983	4,656	2,271		2,358		
052 SPEECH PATHOLOGY	983	4,656	2,271		904		
053 ELECTROCARDIOLOGY	20,585		47,569		5,176		
054 ELECTROENCEPHALOGRAPHY							
055 MEDICAL SUPPLIES CHARGED							
055 30 IMPL. DEV. CHARGED TO PAT							
056 DRUGS CHARGED TO PATIENTS							
057 RENAL DIALYSIS							
058 ASC (NON-DISTINCT PART)							
058 01 ASC (NON-DISTINCT PART)	21,478		49,632		3,668		
059 CARDIAC CATHETERIZATION L							
059 97 CARDIAC REHABILITATION					819		
060 OUTPAT SERVICE COST CNTRS							
060 CLINIC							
060 01 CLINIC							
060 02 SLEEP LAB	1,311	6,972	3,029		7,979		
061 EMERGENCY	162,501	149,322	375,513		47,275		595,878
062 OBSERVATION BEDS (NON-DIS							
062 OTHER REIMBURS COST CNTRS							
064 HOME PROGRAM DIALYSIS							
065 AMBULANCE SERVICES							
066 DURABLE MEDICAL EQUIP-REN							
067 DURABLE MEDICAL EQUIP-SOL							
069 CORF							
070 I&R SERVICES-NOT APPRVD P							
071 HOME HEALTH AGENCY							
082 LUNG ACQUISITION							
083 SPEC PURPOSE COST CENTERS							
083 KIDNEY ACQUISITION							



COST CENTER DESCRIPTION	CENTRAL SERVICES & SUPPLY	PHARMACY	MEDICAL RECORDS & LIBRARY	SOCIAL SERVICE	NONPHYSICIAN ANESTHETISTS	NURSING SCHOOL	I&R SERVICES-SALARY & FRI
	15	16	17	18	20	21	22
001 GENERAL SERVICE COST CNTR							
002 OLD CAP REL COSTS-BLDG &							
003 OLD CAP REL COSTS-MVBLE E							
003 NEW CAP REL COSTS-BLDG &							
003 01 MOB							
003 02 INTEREST							
004 NEW CAP REL COSTS-MVBLE E							
005 EMPLOYEE BENEFITS							
006 01 NONPATIENT TELEPHONES							
006 02 DATA PROCESSING							
006 03 PURCHASING, RECEIVING AND							
006 04 OTHER ADMINISTRATIVE AND							
007 MAINTENANCE & REPAIRS							
008 OPERATION OF PLANT							
009 LAUNDRY & LINEN SERVICE							
010 HOUSEKEEPING							
011 DIETARY							
012 CAFETERIA							
013 MAINTENANCE OF PERSONNEL							
014 NURSING ADMINISTRATION							
015 CENTRAL SERVICES & SUPPLY	7,084,431						
016 PHARMACY	45,209	6,401,895					
017 MEDICAL RECORDS & LIBRARY							
018 SOCIAL SERVICE				284,194			
020 NONPHYSICIAN ANESTHETISTS							
021 NURSING SCHOOL							
022 I&R SERVICES-SALARY & FRI							
023 I&R SERVICES-OTHER PRGM C							
024 PARAMED ED PRGM							
025 INPAT ROUTINE SRVC CNTRS							
025 ADULTS & PEDIATRICS	641,536			209,003			
026 INTENSIVE CARE UNIT	156,077			42,393			
027 CORONARY CARE UNIT							
028 BURN INTENSIVE CARE UNIT							
029 SURGICAL INTENSIVE CARE U							
031 SUBPROVIDER							
033 NURSERY	115,607			32,798			
034 SKILLED NURSING FACILITY							
035 NURSING FACILITY							
035 01 ICF/MR							
036 OTHER LONG TERM CARE							
037 ANCILLARY SRVC COST CNTRS							
037 OPERATING ROOM	4,282,651	2,267					
038 RECOVERY ROOM	59,473						
039 DELIVERY ROOM & LABOR ROO							
040 ANESTHESIOLOGY							
041 RADIOLOGY-DIAGNOSTIC	412,292	232,668					
042 RADIOLOGY-THERAPEUTIC	10,633	757					
043 RADIOISOTOPE							
044 LABORATORY	380,431	858,850					
045 PBP CLINICAL LAB SERVICES							
046 WHOLE BLOOD & PACKED RED							
047 BLOOD STORING, PROCESSING							
048 INTRAVENOUS THERAPY							
049 RESPIRATORY THERAPY	53,682	95,725					
050 PHYSICAL THERAPY	28,860						
051 OCCUPATIONAL THERAPY	2,713						
052 SPEECH PATHOLOGY	1,917						
053 ELECTROCARDIOLOGY	10,969	41					
054 ELECTROENCEPHALOGRAPHY							
055 MEDICAL SUPPLIES CHARGED							
055 30 IMPL. DEV. CHARGED TO PAT							
056 DRUGS CHARGED TO PATIENTS		5,209,275					
057 RENAL DIALYSIS							
058 ASC (NON-DISTINCT PART)							
058 01 ASC (NON-DISTINCT PART)	483,371	2,312					
059 CARDIAC CATHETERIZATION L							
059 97 CARDIAC REHABILITATION	1,334						
060 OUTPAT SERVICE COST CNTRS							
060 CLINIC							
060 01 CLINIC							
060 02 SLEEP LAB	26,761						
061 EMERGENCY	370,915						
062 OBSERVATION BEDS (NON-DIS							
062 OTHER REIMBURS COST CNTRS							
064 HOME PROGRAM DIALYSIS							
065 AMBULANCE SERVICES							
066 DURABLE MEDICAL EQUIP-REN							
067 DURABLE MEDICAL EQUIP-SOL							
069 CORF							
070 I&R SERVICES-NOT APPRVD P							
071 HOME HEALTH AGENCY							
082 LUNG ACQUISITION							
SPEC PURPOSE COST CENTERS							
083 KIDNEY ACQUISITION							

COST CENTER DESCRIPTION	CENTRAL SERVICES & SUPPLY	PHARMACY	MEDICAL RECORDS & LIBRARY	SOCIAL SERVICE	NONPHYSICIAN ANESTHETISTS	NURSING SCHOOL	I&R SERVICES-SALARY & FRI
	15	16	17	18	20	21	22
084 SPEC PURPOSE COST CENTERS							
085 LIVER ACQUISITION							
085 01 HEART ACQUISITION							
086 01 PANCREAS ACQUISITION							
092 086 OTHER ORGAN ACQUISITION							
093 AMBULATORY SURGICAL CENTER							
095 HOSPICE							
095 SUBTOTALS	7,084,431	6,401,895		284,194			
096 NONREIMBURS COST CENTERS							
097 GIFT, FLOWER, COFFEE SHOP							
098 RESEARCH							
098 PHYSICIANS' PRIVATE OFFICE							
098 01 RETAIL PHARMACY							
098 02 MARKETING							
099 NONPAID WORKERS							
101 CROSS FOOT ADJUSTMENT							
102 NEGATIVE COST CENTER							
103 TOTAL	7,084,431	6,401,895		284,194			

COST CENTER DESCRIPTION	I&R SERVICES- PARAMEDED PR SUBTOTAL			I&R COST POST STEP-DOWN ADJ 26	TOTAL
	23	24	25		
001 GENERAL SERVICE COST CNTR					
002 OLD CAP REL COSTS-BLDG &					
003 OLD CAP REL COSTS-MVBLE E					
003 NEW CAP REL COSTS-BLDG &					
003 01 MOB					
003 02 INTEREST					
004 NEW CAP REL COSTS-MVBLE E					
005 EMPLOYEE BENEFITS					
006 01 NONPATIENT TELEPHONES					
006 02 DATA PROCESSING					
006 03 PURCHASING, RECEIVING AND					
006 04 OTHER ADMINISTRATIVE AND					
007 MAINTENANCE & REPAIRS					
008 OPERATION OF PLANT					
009 LAUNDRY & LINEN SERVICE					
010 HOUSEKEEPING					
011 DIETARY					
012 CAFETERIA					
013 MAINTENANCE OF PERSONNEL					
014 NURSING ADMINISTRATION					
015 CENTRAL SERVICES & SUPPLY					
016 PHARMACY					
017 MEDICAL RECORDS & LIBRARY					
018 SOCIAL SERVICE					
020 NONPHYSICIAN ANESTHETISTS					
021 NURSING SCHOOL					
022 I&R SERVICES-SALARY & FRI					
023 I&R SERVICES-OTHER PRGM C					
024 PARAMEDED PRGM					
025 INPAT ROUTINE SRVC CNTRS					
025 ADULTS & PEDIATRICS			35,919,042		35,919,042
026 INTENSIVE CARE UNIT			6,802,677		6,802,677
027 CORONARY CARE UNIT					
028 BURN INTENSIVE CARE UNIT					
029 SURGICAL INTENSIVE CARE U					
031 SUBPROVIDER					
033 NURSERY			3,709,173		3,709,173
034 SKILLED NURSING FACILITY					
035 NURSING FACILITY					
035 01 ICF/MR					
036 OTHER LONG TERM CARE					
037 ANCILLARY SRVC COST CNTRS					
037 OPERATING ROOM			13,056,009		13,056,009
038 RECOVERY ROOM			2,592,212		2,592,212
039 DELIVERY ROOM & LABOR ROO					
040 ANESTHESIOLOGY					
041 RADIOLOGY-DIAGNOSTIC			8,728,818		8,728,818
042 RADIOLOGY-THERAPEUTIC			3,497,257		3,497,257
043 RADIOISOTOPE					
044 LABORATORY			6,845,951		6,845,951
045 PBP CLINICAL LAB SERVICES					
046 WHOLE BLOOD & PACKED RED					
047 BLOOD STORING, PROCESSING					
048 INTRAVENOUS THERAPY					
049 RESPIRATORY THERAPY			1,993,489		1,993,489
050 PHYSICAL THERAPY			1,930,182		1,930,182
051 OCCUPATIONAL THERAPY			425,650		425,650
052 SPEECH PATHOLOGY			197,408		197,408
053 ELECTROCARDIOLOGY			1,168,692		1,168,692
054 ELECTROENCEPHALOGRAPHY					
055 MEDICAL SUPPLIES CHARGED			2,096,852		2,096,852
055 30 IMPL. DEV. CHARGED TO PAT			4,190,432		4,190,432
056 DRUGS CHARGED TO PATIENTS			5,209,275		5,209,275
057 RENAL DIALYSIS					
058 ASC (NON-DISTINCT PART)					
058 01 ASC (NON-DISTINCT PART)			1,495,238		1,495,238
059 CARDIAC CATHETERIZATION L					
059 97 CARDIAC REHABILITATION			150,953		150,953
060 OUTPAT SERVICE COST CNTRS					
060 CLINIC					
060 01 CLINIC					
060 02 SLEEP LAB			966,662		966,662
061 EMERGENCY			9,899,722		9,899,722
062 OBSERVATION BEDS (NON-DIS					
062 OTHER REIMBURS COST CNTRS					
064 HOME PROGRAM DIALYSIS					
065 AMBULANCE SERVICES					
066 DURABLE MEDICAL EQUIP-REN					
067 DURABLE MEDICAL EQUIP-SOL					
069 CORF					
070 I&R SERVICES-NOT APPRVD P					
071 HOME HEALTH AGENCY					
082 LUNG ACQUISITION					
083 SPEC PURPOSE COST CENTERS					
083 KIDNEY ACQUISITION					





ALLOCATION OF NEW CAPITAL RELATED COSTS

COST CENTER DESCRIPTION	DIR ASSGND NEW CAPITAL REL COSTS 0	OLD CAP REL C OSTS-BLDG & 1	OLD CAP REL C OSTS-MVBLE E 2	NEW CAP REL C OSTS-BLDG & 3	INTEREST		NEW CAP REL C OSTS-MVBLE E 4
					3.01	3.02	
084 SPEC PURPOSE COST CENTERS							
085 LIVER ACQUISITION							
085 HEART ACQUISITION							
085 01 PANCREAS ACQUISITION							
086 OTHER ORGAN ACQUISITION							
092 AMBULATORY SURGICAL CENTE							
093 HOSPICE							
095 SUBTOTALS				3,857,997	384,786	9,246,532	7,333,504
NONREIMBURS COST CENTERS							
096 GIFT, FLOWER, COFFEE SHOP					28,810		
097 RESEARCH							
098 PHYSICIANS' PRIVATE OFFIC							
098 01 RETAIL PHARMACY				305,249	19,187	731,597	4,727
098 02 MARKETING				3,284	12,671	7,871	
099 NONPAID WORKERS							
101 CROSS FOOT ADJUSTMENTS							
102 NEGATIVE COST CENTER							
103 TOTAL				4,166,530	445,454	9,986,000	7,338,231

ALLOCATION OF NEW CAPITAL RELATED COSTS

15-0158

FROM 1/ 1/2010

WORKSHEET B

TO 12/31/2010

PART III

COST CENTER DESCRIPTION	SUBTOTAL	EMPLOYEE BENEFITS	NONPATIENT TELEPHONES	DATA PROCESSING	PURCHASING, RECEIVING AND	OTHER ADMINISTRATIVE	MAINTENANCE & REPAIRS
	4a	5	6.01	6.02	6.03	6.04	7
001 GENERAL SERVICE COST CNTR							
002 OLD CAP REL COSTS-BLDG &							
003 OLD CAP REL COSTS-MVBLE E							
003 NEW CAP REL COSTS-BLDG &							
003 01 MOB							
003 02 INTEREST							
004 NEW CAP REL COSTS-MVBLE E							
005 EMPLOYEE BENEFITS	58,536	58,536					
006 01 NONPATIENT TELEPHONES	567,995		567,995				
006 02 DATA PROCESSING	344,278	208	5,318	349,804			
006 03 PURCHASING, RECEIVING AND	188,951	292	4,255	2,645	196,143		
006 04 OTHER ADMINISTRATIVE AND	672,558	2,643	69,138	42,982		787,321	
007 MAINTENANCE & REPAIRS	3,388,972	838	26,060	16,201	17	53,163	3,485,251
008 OPERATION OF PLANT	635,213		23,401	14,548	2	12,102	45,957
009 LAUNDRY & LINEN SERVICE	48,871					3,851	14,627
010 HOUSEKEEPING	201,518	1,315	4,255	2,645	350	27,773	61,213
011 DIETARY	581,046	841	11,168	6,943	43	15,313	188,535
012 CAFETERIA	1,341	595			30	2,967	
013 MAINTENANCE OF PERSONNEL							
014 NURSING ADMINISTRATION	82,496	2,192	6,382	3,968		20,010	25,046
015 CENTRAL SERVICES & SUPPLY	450,697	328	1,595	992		44,138	104,365
016 PHARMACY	115,359	2,492	10,637	6,613	1,249	41,101	35,933
017 MEDICAL RECORDS & LIBRARY							
018 SOCIAL SERVICE		219	2,659	1,653		1,718	
020 NONPHYSICIAN ANESTHETISTS							
021 NURSING SCHOOL							
022 I&R SERVICES-SALARY & FRI							
023 I&R SERVICES-OTHER PRGM C							
024 PARAMED ED PRGM							
025 INPAT ROUTINE SRVC CNTRS	5,212,028	16,745	149,976	93,235	17,722	168,594	1,218,287
026 ADULTS & PEDIATRICS	429,459	4,174			4,312	33,958	139,144
027 INTENSIVE CARE UNIT							
028 CORONARY CARE UNIT							
029 BURN INTENSIVE CARE UNIT							
029 SURGICAL INTENSIVE CARE U							
031 SUBPROVIDER							
033 NURSERY	355,796	2,252	2,127	1,323	3,194	18,433	46,513
034 SKILLED NURSING FACILITY							
035 NURSING FACILITY							
035 01 ICF/MR							
036 OTHER LONG TERM CARE							
037 ANCILLARY SRVC COST CNTRS							
038 OPERATING ROOM	2,279,033	2,828	47,865	29,756	118,303	45,824	423,407
038 RECOVERY ROOM	111,634	2,129	3,191	1,984	1,643	15,684	36,854
039 DELIVERY ROOM & LABOR ROO							
040 ANESTHESIOLOGY							
041 RADIOLOGY-DIAGNOSTIC	1,713,296	4,208	37,760	23,475	11,389	47,125	220,683
042 RADIOLOGY-THERAPEUTIC	1,283,930	1,044	16,487	10,249	294	19,096	143,206
043 RADIOISOTOPE							
044 LABORATORY	346,756	1,527	21,273	13,225	10,509	35,735	50,765
045 PBP CLINICAL LAB SERVICES							
046 WHOLE BLOOD & PACKED RED							
047 BLOOD STORING, PROCESSING							
048 INTRAVENOUS THERAPY							
049 RESPIRATORY THERAPY	91,674	1,538	1,064	661	1,483	11,823	12,216
050 PHYSICAL THERAPY	79,427	1,627	20,210	12,564	797	12,456	1,754
051 OCCUPATIONAL THERAPY	79,427	294	1,064	661	75	2,714	1,754
052 SPEECH PATHOLOGY	79,427	92			53	1,213	1,754
053 ELECTROCARDIOLOGY	242,745	662	2,659	1,653	303	6,641	36,722
054 ELECTROENCEPHALOGRAPHY							
055 MEDICAL SUPPLIES CHARGED						13,925	
055 30 IMPL. DEV. CHARGED TO PAT						27,829	
056 DRUGS CHARGED TO PATIENTS							
057 RENAL DIALYSIS							
058 ASC (NON-DISTINCT PART)							
058 01 ASC (NON-DISTINCT PART)	128,561	499	4,786	2,976	13,353	5,623	38,315
059 CARDIAC CATHETERIZATION L							
059 97 CARDIAC REHABILITATION	13,867	78	1,595	992	37	988	
060 OUTPAT SERVICE COST CNTRS							
060 01 CLINIC							
060 02 SLEEP LAB	51,408	737	4,786	2,976	739	6,078	2,338
061 EMERGENCY	986,520	5,298	72,329	44,965	10,246	50,023	289,890
062 OBSERVATION BEDS (NON-DIS							
062 OTHER REIMBURS COST CNTRS							
064 HOME PROGRAM DIALYSIS							
065 AMBULANCE SERVICES							
066 DURABLE MEDICAL EQUIP-REN							
067 DURABLE MEDICAL EQUIP-SOL							
069 CORF							
070 I&R SERVICES-NOT APPRVD P							
071 HOME HEALTH AGENCY							
082 LUNG ACQUISITION							
SPEC PURPOSE COST CENTERS							
083 KIDNEY ACQUISITION							

ALLOCATION OF NEW CAPITAL RELATED COSTS

PROVIDER NO: 15-0158  
 PERIOD: FROM 1/1/2010 TO 12/31/2010  
 PREPARED 6/20/2011  
 WORKSHEET B  
 PART III

COST CENTER DESCRIPTION	SUBTOTAL	EMPLOYEE BENEFITS	NONPATIENT TELEPHONES	DATA PROCESSING	PURCHASING, RECEIVING AND	OTHER ADMINISTRATIVE AND	MAINTENANCE & REPAIRS
	4a	5	6.01	6.02	6.03	6.04	7
084 SPEC PURPOSE COST CENTERS							
085 LIVER ACQUISITION							
085 HEART ACQUISITION							
085 01 PANCREAS ACQUISITION							
086 OTHER ORGAN ACQUISITION							
092 AMBULATORY SURGICAL CENTER							
093 HOSPICE							
095 SUBTOTALS	20,822,819	57,695	552,040	339,885	196,143	745,898	3,139,278
096 NONREIMBURS COST CENTERS							
097 GIFT, FLOWER, COFFEE SHOP	28,810	122	3,191	1,984		2,741	
097 RESEARCH							
098 PHYSICIANS' PRIVATE OFFICE							
098 01 RETAIL PHARMACY	1,060,760	463	8,509	5,290		26,579	342,291
098 02 MARKETING	23,826	256	4,255	2,645		12,103	3,682
099 NONPAID WORKERS							
101 CROSS FOOT ADJUSTMENTS							
102 NEGATIVE COST CENTER							
103 TOTAL	21,936,215	58,536	567,995	349,804	196,143	787,321	3,485,251

ALLOCATION OF NEW CAPITAL RELATED COSTS

15-0158

FROM 1/ 1/2010

WORKSHEET B

TO 12/31/2010

PART III

COST CENTER DESCRIPTION	OPERATION OF PLANT	LAUNDRY & LINEN SERVICE	HOUSEKEEPING	DIETARY	CAFETERIA	MAINTENANCE PERSONNEL	NURSING ADMINISTRATION
	8	9	10	11	12	13	14
001 GENERAL SERVICE COST CNTR							
002 OLD CAP REL COSTS-BLDG &							
003 OLD CAP REL COSTS-MVBLE E							
003 NEW CAP REL COSTS-BLDG &							
003 01 MOB							
003 02 INTEREST							
004 NEW CAP REL COSTS-MVBLE E							
005 EMPLOYEE BENEFITS							
006 01 NONPATIENT TELEPHONES							
006 02 DATA PROCESSING							
006 03 PURCHASING, RECEIVING AND							
006 04 OTHER ADMINISTRATIVE AND							
007 MAINTENANCE & REPAIRS							
008 OPERATION OF PLANT	731,223						
009 LAUNDRY & LINEN SERVICE	3,110	70,459					
010 HOUSEKEEPING	13,014		312,083				
011 DIETARY	40,084		17,493	861,466			
012 CAFETERIA					4,933		
013 MAINTENANCE OF PERSONNEL							
014 NURSING ADMINISTRATION	5,325		2,324		155		147,898
015 CENTRAL SERVICES & SUPPLY	22,189		9,684		52		
016 PHARMACY	7,640	13	3,334		203		
017 MEDICAL RECORDS & LIBRARY							
018 SOCIAL SERVICE					21		1,117
020 NONPHYSICIAN ANESTHETISTS							
021 NURSING SCHOOL							
022 I&R SERVICES-SALARY & FRI							
023 I&R SERVICES-OTHER PRGM C							
024 PARAMED ED PRGM							
025 INPAT ROUTINE SRVC CNTRS							
025 ADULTS & PEDIATRICS	259,019	35,102	113,039	633,542	1,653		89,151
026 INTENSIVE CARE UNIT	29,583		12,911	128,505	367		19,789
027 CORONARY CARE UNIT							
028 BURN INTENSIVE CARE UNIT							
029 SURGICAL INTENSIVE CARE U							
031 SUBPROVIDER							
033 NURSERY	9,889	1,585	4,316	99,419	180		9,696
034 SKILLED NURSING FACILITY							
035 NURSING FACILITY							
035 01 ICF/MR							
036 OTHER LONG TERM CARE							
037 ANCILLARY SRVC COST CNTRS							
037 OPERATING ROOM	90,020	9,869	39,286		281		
038 RECOVERY ROOM	7,835		3,420		199		
039 DELIVERY ROOM & LABOR ROO							
040 ANESTHESIOLOGY							
041 RADIOLOGY-DIAGNOSTIC	46,919	3,756	20,476		422		
042 RADIOLOGY-THERAPEUTIC	30,447	838	13,288		92		
043 RADIOISOTOPE							
044 LABORATORY	10,793		4,710		164		
045 PBP CLINICAL LAB SERVICES							
046 WHOLE BLOOD & PACKED RED							
047 BLOOD STORING, PROCESSING							
048 INTRAVENOUS THERAPY							
049 RESPIRATORY THERAPY	2,597		1,134		144		
050 PHYSICAL THERAPY	373	528	163		152		
051 OCCUPATIONAL THERAPY	373	528	163		26		
052 SPEECH PATHOLOGY	373	528	163		10		
053 ELECTROCARDIOLOGY	7,807		3,407		57		
054 ELECTROENCEPHALOGRAPHY							
055 MEDICAL SUPPLIES CHARGED							
055 30 IMPL. DEV. CHARGED TO PAT							
056 DRUGS CHARGED TO PATIENTS							
057 RENAL DIALYSIS							
058 ASC (NON-DISTINCT PART)							
058 01 ASC (NON-DISTINCT PART)	8,146		3,555		41		
059 CARDIAC CATHETERIZATION L							
059 97 CARDIAC REHABILITATION					9		
060 OUTPAT SERVICE COST CNTRS							
060 CLINIC							
060 01 CLINIC							
060 02 SLEEP LAB	497	790	217		88		
061 EMERGENCY	61,633	16,922	26,898		522		28,145
062 OBSERVATION BEDS (NON-DIS							
062 OTHER REIMBURS COST CNTRS							
064 HOME PROGRAM DIALYSIS							
065 AMBULANCE SERVICES							
066 DURABLE MEDICAL EQUIP-REN							
067 DURABLE MEDICAL EQUIP-SOL							
069 CORF							
070 I&R SERVICES-NOT APPRVD P							
071 HOME HEALTH AGENCY							
082 LUNG ACQUISITION							
083 SPEC PURPOSE COST CENTERS							
083 KIDNEY ACQUISITION							

ALLOCATION OF NEW CAPITAL RELATED COSTS

15-0158

FROM 1/ 1/2010

WORKSHEET B

TO 12/31/2010

PART III

COST CENTER DESCRIPTION	OPERATION OF PLANT	LAUNDRY & LINEN SERVICE	HOUSEKEEPING	DIETARY	CAFETERIA	MAINTENANCE PERSONNEL	NURSING ADMINISTRATION
	8	9	10	11	12	13	14
084 SPEC PURPOSE COST CENTERS							
085 LIVER ACQUISITION							
085 HEART ACQUISITION							
085 01 PANCREAS ACQUISITION							
086 OTHER ORGAN ACQUISITION							
092 AMBULATORY SURGICAL CENTER							
093 HOSPICE							
095 SUBTOTALS	657,666	70,459	279,981	861,466	4,838		147,898
096 NONREIMBURS COST CENTERS							
097 GIFT, FLOWER, COFFEE SHOP					26		
097 RESEARCH							
098 PHYSICIANS' PRIVATE OFFICE							
098 01 RETAIL PHARMACY	72,774		31,760		44		
098 02 MARKETING	783		342		25		
099 NONPAID WORKERS							
101 CROSS FOOT ADJUSTMENTS							
102 NEGATIVE COST CENTER							
103 TOTAL	731,223	70,459	312,083	861,466	4,933		147,898

ALLOCATION OF NEW CAPITAL RELATED COSTS

15-0158

FROM 1/ 1/2010

WORKSHEET B

TO 12/31/2010

PART III

COST CENTER DESCRIPTION	CENTRAL SERVICES & SUPPLY	PHARMACY	MEDICAL RECORDS & LIBRARY	SOCIAL SERVICE	NONPHYSICIAN ANESTHETISTS	NURSING SCHOOL	I&R SERVICES-SALARY & FRI
	15	16	17	18	20	21	22
001 GENERAL SERVICE COST CNTR							
002 OLD CAP REL COSTS-BLDG &							
003 OLD CAP REL COSTS-MVBLE E							
003 NEW CAP REL COSTS-BLDG &							
003 01 MOB							
003 02 INTEREST							
004 NEW CAP REL COSTS-MVBLE E							
005 EMPLOYEE BENEFITS							
006 01 NONPATIENT TELEPHONES							
006 02 DATA PROCESSING							
006 03 PURCHASING, RECEIVING AND							
006 04 OTHER ADMINISTRATIVE AND							
007 MAINTENANCE & REPAIRS							
008 OPERATION OF PLANT							
009 LAUNDRY & LINEN SERVICE							
010 HOUSEKEEPING							
011 DIETARY							
012 CAFETERIA							
013 MAINTENANCE OF PERSONNEL							
014 NURSING ADMINISTRATION							
015 CENTRAL SERVICES & SUPPLY	634,040						
016 PHARMACY	4,046	228,620					
017 MEDICAL RECORDS & LIBRARY							
018 SOCIAL SERVICE				7,387			
020 NONPHYSICIAN ANESTHETISTS							
021 NURSING SCHOOL							
022 I&R SERVICES-SALARY & FRI							
023 I&R SERVICES-OTHER PRGM C							
024 PARAMED ED PRGM							
025 INPAT ROUTINE SRVC CNTRS							
025 ADULTS & PEDIATRICS	57,416			5,432			
026 INTENSIVE CARE UNIT	13,968			1,102			
027 CORONARY CARE UNIT							
028 BURN INTENSIVE CARE UNIT							
029 SURGICAL INTENSIVE CARE U							
031 SUBPROVIDER							
033 NURSERY	10,347			853			
034 SKILLED NURSING FACILITY							
035 NURSING FACILITY							
035 01 ICF/MR							
036 OTHER LONG TERM CARE							
037 ANCILLARY SRVC COST CNTRS							
037 OPERATING ROOM	383,288	81					
038 RECOVERY ROOM	5,323						
039 DELIVERY ROOM & LABOR ROO							
040 ANESTHESIOLOGY							
041 RADIOLOGY-DIAGNOSTIC	36,899	8,309					
042 RADIOLOGY-THERAPEUTIC	952	27					
043 RADIOISOTOPE							
044 LABORATORY	34,047	30,671					
045 PBP CLINICAL LAB SERVICES							
046 WHOLE BLOOD & PACKED RED							
047 BLOOD STORING, PROCESSING							
048 INTRAVENOUS THERAPY							
049 RESPIRATORY THERAPY	4,804	3,418					
050 PHYSICAL THERAPY	2,583						
051 OCCUPATIONAL THERAPY	243						
052 SPEECH PATHOLOGY	172						
053 ELECTROCARDIOLOGY	982	1					
054 ELECTROENCEPHALOGRAPHY							
055 MEDICAL SUPPLIES CHARGED							
055 30 IMPL. DEV. CHARGED TO PAT							
056 DRUGS CHARGED TO PATIENTS		186,030					
057 RENAL DIALYSIS							
058 ASC (NON-DISTINCT PART)							
058 01 ASC (NON-DISTINCT PART)	43,260	83					
059 CARDIAC CATHETERIZATION L							
059 97 CARDIAC REHABILITATION	119						
060 OUTPAT SERVICE COST CNTRS							
060 CLINIC							
060 01 CLINIC							
060 02 SLEEP LAB	2,395						
061 EMERGENCY	33,196						
062 OBSERVATION BEDS (NON-DIS							
062 OTHER REIMBURS COST CNTRS							
064 HOME PROGRAM DIALYSIS							
065 AMBULANCE SERVICES							
066 DURABLE MEDICAL EQUIP-REN							
067 DURABLE MEDICAL EQUIP-SOL							
069 CORF							
070 I&R SERVICES-NOT APPRVD P							
071 HOME HEALTH AGENCY							
082 LUNG ACQUISITION							
083 SPEC PURPOSE COST CENTERS							
083 KIDNEY ACQUISITION							

ALLOCATION OF NEW CAPITAL RELATED COSTS

PROVIDER NO: 15-0158  
 PERIOD: FROM 1/1/2010 TO 12/31/2010  
 PREPARED 6/20/2011  
 WORKSHEET B  
 PART III

COST CENTER DESCRIPTION	CENTRAL SERVICES & SUPPLY	PHARMACY	MEDICAL RECORDS & LIBRARY	SOCIAL SERVICE	NONPHYSICIAN ANESTHETISTS	NURSING	SCHOOL	I&R SERVICES-SALARY & FRI
	15	16	17	18	20	21		22
084 SPEC PURPOSE COST CENTERS								
085 LIVER ACQUISITION								
085 HEART ACQUISITION								
085 01 PANCREAS ACQUISITION								
086 OTHER ORGAN ACQUISITION								
092 AMBULATORY SURGICAL CENTER								
093 HOSPICE								
095 SUBTOTALS	634,040	228,620		7,387				
096 NONREIMBURS COST CENTERS								
096 GIFT, FLOWER, COFFEE SHOP								
097 RESEARCH								
098 PHYSICIANS' PRIVATE OFFICE								
098 01 RETAIL PHARMACY								
098 02 MARKETING								
099 NONPAID WORKERS								
101 CROSS FOOT ADJUSTMENTS								
102 NEGATIVE COST CENTER								
103 TOTAL	634,040	228,620		7,387				

ALLOCATION OF NEW CAPITAL RELATED COSTS

	I&R SERVICES- OTHER PRGM C	PARAMED ED PR GM	SUBTOTAL	POST STEPDOWN ADJUSTMENT	TOTAL
	23	24	25	26	27
001	GENERAL SERVICE COST CNTR				
002	OLD CAP REL COSTS-BLDG &				
003	OLD CAP REL COSTS-MVBLE E				
003	NEW CAP REL COSTS-BLDG &				
003	01 MOB				
003	02 INTEREST				
004	NEW CAP REL COSTS-MVBLE E				
005	EMPLOYEE BENEFITS				
006	01 NONPATIENT TELEPHONES				
006	02 DATA PROCESSING				
006	03 PURCHASING, RECEIVING AND				
006	04 OTHER ADMINISTRATIVE AND				
007	MAINTENANCE & REPAIRS				
008	OPERATION OF PLANT				
009	LAUNDRY & LINEN SERVICE				
010	HOUSEKEEPING				
011	DIETARY				
012	CAFETERIA				
013	MAINTENANCE OF PERSONNEL				
014	NURSING ADMINISTRATION				
015	CENTRAL SERVICES & SUPPLY				
016	PHARMACY				
017	MEDICAL RECORDS & LIBRARY				
018	SOCIAL SERVICE				
020	NONPHYSICIAN ANESTHETISTS				
021	NURSING SCHOOL				
022	I&R SERVICES-SALARY & FRI				
023	I&R SERVICES-OTHER PRGM C				
024	PARAMED ED PRGM				
025	INPAT ROUTINE SRVC CNTRS		8,070,941		8,070,941
026	ADULTS & PEDIATRICS		817,272		817,272
027	INTENSIVE CARE UNIT				
028	CORONARY CARE UNIT				
029	BURN INTENSIVE CARE UNIT				
031	SURGICAL INTENSIVE CARE U				
033	SUBPROVIDER		565,923		565,923
034	NURSERY				
034	SKILLED NURSING FACILITY				
035	NURSING FACILITY				
035	01 ICF/MR				
036	OTHER LONG TERM CARE				
037	ANCILLARY SRVC COST CNTRS				
038	OPERATING ROOM		3,469,841		3,469,841
039	RECOVERY ROOM		189,896		189,896
040	DELIVERY ROOM & LABOR ROO				
041	ANESTHESIOLOGY				
042	RADIOLOGY-DIAGNOSTIC		2,174,717		2,174,717
043	RADIOLOGY-THERAPEUTIC		1,519,950		1,519,950
044	RADIOISOTOPE				
045	LABORATORY		560,175		560,175
046	PBP CLINICAL LAB SERVICES				
047	WHOLE BLOOD & PACKED RED				
048	BLOOD STORING, PROCESSING				
049	INTRAVENOUS THERAPY				
050	RESPIRATORY THERAPY		132,556		132,556
051	PHYSICAL THERAPY		132,634		132,634
052	OCCUPATIONAL THERAPY		87,322		87,322
053	SPEECH PATHOLOGY		83,785		83,785
054	ELECTROCARDIOLOGY		303,639		303,639
055	ELECTROENCEPHALOGRAPHY				
055	MEDICAL SUPPLIES CHARGED		13,925		13,925
056	01 IMPL. DEV. CHARGED TO PAT		27,829		27,829
057	DRUGS CHARGED TO PATIENTS		186,030		186,030
058	RENAL DIALYSIS				
058	ASC (NON-DISTINCT PART)				
059	01 ASC (NON-DISTINCT PART)		249,198		249,198
059	CARDIAC CATHETERIZATION L				
059	97 CARDIAC REHABILITATION		17,685		17,685
060	OUTPAT SERVICE COST CNTRS				
060	CLINIC				
060	01 CLINIC				
061	02 SLEEP LAB		73,049		73,049
062	EMERGENCY		1,626,587		1,626,587
064	OBSERVATION BEDS (NON-DIS				
065	OTHER REIMBURS COST CNTRS				
066	HOME PROGRAM DIALYSIS				
067	AMBULANCE SERVICES				
069	DURABLE MEDICAL EQUIP-REN				
070	DURABLE MEDICAL EQUIP-SOL				
071	CORF				
072	I&R SERVICES-NOT APPRVD P				
082	HOME HEALTH AGENCY				
083	LUNG ACQUISITION				
083	SPEC PURPOSE COST CENTERS				
083	KIDNEY ACQUISITION				



COST ALLOCATION - STATISTICAL BASIS

PROVIDER NO: 15-0158  
 PERIOD: FROM 1/1/2010 TO 12/31/2010  
 PREPARED 6/20/2011  
 WORKSHEET B-1

COST CENTER DESCRIPTION	OLD CAP REL C	OLD CAP REL C	NEW CAP REL C	MOB	INTEREST	NEW CAP REL C
	OSTS-BLDG &	OSTS-MVBLE E	OSTS-BLDG &	(MOB) UARE FEET	SQ(SQUARE FEET )	OSTS-MVBLE E
	(SQUARE FEET )	(DOLLAR )VALUE	(SQUARE FEET )	(MOB) UARE FEET	SQ(SQUARE FEET )	(DOLLAR )VALUE
	1	2	3	3.01	3.02	4
GENERAL SERVICE COST						
001 OLD CAP REL COSTS-BLD						
002 OLD CAP REL COSTS-MVB						
003 NEW CAP REL COSTS-BLD			319,728			
003 01 MOB				22,358		
003 02 INTEREST					319,728	
004 NEW CAP REL COSTS-MVB						3,829,970
005 EMPLOYEE BENEFITS				2,938		
006 01 NONPATIENT TELEPHONES			1,846		1,846	253,801
006 02 DATA PROCESSING			2,112	649	2,112	124,145
006 03 PURCHASING, RECEIVING			4,250		4,250	432
006 04 OTHER ADMINISTRATIVE			11,910	3,799	11,910	36,367
007 MAINTENANCE & REPAIRS			61,104	868	61,104	348,096
008 OPERATION OF PLANT			3,145	109	3,145	257,740
009 LAUNDRY & LINEN SERVICE			1,001		1,001	2,381
010 HOUSEKEEPING			4,189	384	4,189	4,407
011 DIETARY			12,902	404	12,902	991
012 CAFETERIA						700
013 MAINTENANCE OF PERSON						
014 NURSING ADMINISTRATION			1,714		1,714	3,459
015 CENTRAL SERVICES & SUPPLY			7,142		7,142	70,230
016 PHARMACY			2,459		2,459	3,400
017 MEDICAL RECORDS & LIBRARY						
018 SOCIAL SERVICE						
020 NONPHYSICIAN ANESTHESIOLOGIST						
021 NURSING SCHOOL						
022 I&R SERVICES-SALARY & BENEFITS						
023 I&R SERVICES-OTHER PERSONNEL						
024 PARAMEDICAL PROGRAM						
025 INPATIENT ROUTINE SERVICES						
026 ADULTS & PEDIATRICS			83,371		83,371	794,190
027 INTENSIVE CARE UNIT			9,522		9,522	4,162
028 CORONARY CARE UNIT						
029 BURN INTENSIVE CARE UNIT						
031 SURGICAL INTENSIVE CARE UNIT						
033 SUBPROVIDER						
034 NURSERY			3,183		3,183	112,162
035 SKILLED NURSING FACILITY						
036 01 ICF/MR						
037 OTHER LONG TERM CARE						
038 ANCILLARY SERVICE COST CENTER						
039 OPERATING ROOM			28,975		28,975	520,081
040 RECOVERY ROOM			2,522		2,522	
041 DELIVERY ROOM & LABOR						
042 ANESTHESIOLOGY						
043 RADIOLOGY-DIAGNOSTIC			15,102		15,102	545,311
044 RADIOLOGY-THERAPEUTIC			9,800		9,800	443,705
045 RADIOISOTOPE						
046 LABORATORY			3,474		3,474	100,721
047 PBP CLINICAL LAB SERVICE						
048 WHOLE BLOOD & PACKED						
049 BLOOD STORAGE, PROCESSING						
050 INTRAVENOUS THERAPY						
051 RESPIRATORY THERAPY			836		836	28,533
052 PHYSICAL THERAPY			120	2,786	120	9,712
053 OCCUPATIONAL THERAPY			120	2,786	120	9,712
054 SPEECH PATHOLOGY			120	2,786	120	9,712
055 ELECTROCARDIOLOGY			2,513		2,513	68,637
056 ELECTROENCEPHALOGRAPHY						
057 MEDICAL SUPPLIES CHARGED TO PATIENT						
058 30 IMPL. DEV. CHARGED TO PATIENT						
059 DRUGS CHARGED TO PATIENT						
060 RENAL DIALYSIS						
061 ASC (NON-DISTINCT PAR)						
062 01 ASC (NON-DISTINCT PAR)			2,622		2,622	6,524
063 CARDIAC CATHETERIZATION						
064 97 CARDIAC REHABILITATION				696		
065 OUTPAT SERVICE COST CENTER						
066 CLINIC						
067 01 CLINIC						
068 02 SLEEP LAB			160	1,108	160	11,613
069 EMERGENCY			19,838		19,838	56,579
070 OBSERVATION BEDS (NON-PAYING)						
071 OTHER REIMBURSED COST CENTER						
072 HOME PROGRAM DIALYSIS						
073 AMBULANCE SERVICES						
074 DURABLE MEDICAL EQUIPMENT						
075 DURABLE MEDICAL EQUIPMENT						
076 CORF						
077 I&R SERVICES-NOT APPROPRIATE						

COST CENTER DESCRIPTION	OLD CAP REL C OSTS-BLDG & (SQUARE FEET)	OLD CAP REL C OSTS-MVBLE E (DOLLAR VALUE)	NEW CAP REL C OSTS-BLDG & (SQUARE FEET)	MOB (MOB) UARE FEET	INTEREST SQ(SQUARE FEET)	NEW CAP REL C OSTS-MVBLE E (DOLLAR VALUE)
	1	2	3	3.01	3.02	4
OTHER REIMBURS COST C						
071 HOME HEALTH AGENCY						
082 LUNG ACQUISITION						
SPEC PURPOSE COST CEN						
083 KIDNEY ACQUISITION						
084 LIVER ACQUISITION						
085 HEART ACQUISITION						
085 01 PANCREAS ACQUISITION						
086 OTHER ORGAN ACQUISITI						
092 AMBULATORY SURGICAL C						
093 HOSPICE						
095 SUBTOTALS			296,052	19,313	296,052	3,827,503
NONREIMBURS COST CENT						
096 GIFT, FLOWER, COFFEE				1,446		
097 RESEARCH						
098 PHYSICIANS' PRIVATE O						
098 01 RETAIL PHARMACY			23,424	963	23,424	2,467
098 02 MARKETING			252	636	252	
099 NONPAID WORKERS						
101 CROSS FOOT ADJUSTMENT						
102 NEGATIVE COST CENTER						
103 COST TO BE ALLOCATED (WRKSHT B, PART I)			4,166,530	445,454	9,986,000	7,338,231
104 UNIT COST MULTIPLIER (WRKSHT B, PT I)			13.031483	19.923696	31.232798	1.916002
105 COST TO BE ALLOCATED (WRKSHT B, PART II)						
106 UNIT COST MULTIPLIER (WRKSHT B, PT II)						
107 COST TO BE ALLOCATED (WRKSHT B, PART III)						
108 UNIT COST MULTIPLIER (WRKSHT B, PT III)						

COST ALLOCATION - STATISTICAL BASIS

15-0158

FROM 1/ 1/2010

WORKSHEET B-1

TO 12/31/2010

COST CENTER DESCRIPTION	EMPLOYEE BENEFITS	NONPATIENT TELEPHONES	TELEPHONE DATA PROCESSING	PURCHASING, RECEIVING AND	OTHER ADMINISTRATIVE AND	MAINTENANCE & REPAIRS	
	(GROSS SALARIES	(NUMBER OF PHONES	(NUMBER OF PHONES	(PURCHASED) EQ	RECONCILIATION	(ACCUM. COST)	(SQUARE FEET)
GENERAL SERVICE COST	5	6.01	6.02	6.03	6a.04	6.04	7
001 OLD CAP REL COSTS-BLD							
002 OLD CAP REL COSTS-MVB							
003 NEW CAP REL COSTS-BLD							
003 01 MOB							
003 02 INTEREST							
004 NEW CAP REL COSTS-MVB							
005 EMPLOYEE BENEFITS	41,335,361						
006 01 NONPATIENT TELEPHONES		1,068					
006 02 DATA PROCESSING	146,741	10	1,058				
006 03 PURCHASING, RECEIVING	206,511	8	8	11,032,421			
006 04 OTHER ADMINISTRATIVE	1,866,331	130	130		-10,909,485	107,649,145	
007 MAINTENANCE & REPAIRS	591,701	49	49	972		7,268,685	238,506
008 OPERATION OF PLANT		44	44	91		1,654,683	3,145
009 LAUNDRY & LINEN SERVICE						526,590	1,001
010 HOUSEKEEPING	928,857	8	8	19,688		3,797,171	4,189
011 DIETARY	594,119	21	21	2,409		2,093,684	12,902
012 CAFETERIA	419,930			1,699		405,623	
013 MAINTENANCE OF PERSON							
014 NURSING ADMINISTRATION	1,547,695	12	12			2,735,881	1,714
015 CENTRAL SERVICES & SU	231,584	3	3			6,034,733	7,142
016 PHARMACY	1,759,875	20	20	70,245		5,619,462	2,459
017 MEDICAL RECORDS & LIB							
018 SOCIAL SERVICE	154,760	5	5			234,870	
020 NONPHYSICIAN ANESTHET							
021 NURSING SCHOOL							
022 I&R SERVICES-SALARY &							
023 I&R SERVICES-OTHER PR							
024 PARAMEDICAL PRGM							
025 INPATIENT ROUTINE SRVC CN							
026 ADULTS & PEDIATRICS	11,822,755	282	282	996,797		23,054,249	83,371
027 INTENSIVE CARE UNIT	2,947,885			242,508		4,642,877	9,522
028 CORONARY CARE UNIT							
029 BURN INTENSIVE CARE U							
031 SURGICAL INTENSIVE CA							
033 SUBPROVIDER							
034 NURSERY	1,590,682	4	4	179,627		2,520,175	3,183
035 SKILLED NURSING FACIL							
036 NURSING FACILITY							
036 01 ICF/MR							
037 OTHER LONG TERM CARE							
037 ANCILLARY SRVC COST C							
038 OPERATING ROOM	1,997,231	90	90	6,654,248		6,265,258	28,975
038 RECOVERY ROOM	1,503,689	6	6	92,407		2,144,386	2,522
039 DELIVERY ROOM & LABOR							
040 ANESTHESIOLOGY							
041 RADIOLOGY-DIAGNOSTIC	2,971,581	71	71	640,606		6,443,075	15,102
042 RADIOLOGY-THERAPEUTIC	736,964	31	31	16,521		2,610,864	9,800
043 RADIOISOTOPE							
044 LABORATORY	1,078,386	40	40	591,101		4,885,822	3,474
045 PBP CLINICAL LAB SERV							
046 WHOLE BLOOD & PACKED							
047 BLOOD STORAGE, PROCES							
048 INTRAVENOUS THERAPY							
049 RESPIRATORY THERAPY	1,086,316	2	2	83,410		1,616,517	836
050 PHYSICAL THERAPY	1,149,047	38	38	44,841		1,703,020	120
051 OCCUPATIONAL THERAPY	207,776	2	2	4,215		371,039	120
052 SPEECH PATHOLOGY	64,864			2,978		165,842	120
053 ELECTROCARDIOLOGY	467,253	5	5	17,043		907,987	2,513
054 ELECTROENCEPHALOGRAPH							
055 MEDICAL SUPPLIES CHAR						1,903,905	
055 30 IMPL. DEV. CHARGED TO						3,804,838	
056 DRUGS CHARGED TO PATI							
057 RENAL DIALYSIS							
058 ASC (NON-DISTINCT PAR							
058 01 ASC (NON-DISTINCT PAR	352,250	9	9	751,046		768,853	2,622
059 CARDIAC CATHETERIZATI							
059 97 CARDIAC REHABILITATIO	55,326	3	3	2,072		135,108	
060 OUTPAT SERVICE COST C							
060 01 CLINIC							
060 02 SLEEP LAB	520,171	9	9	41,581		831,022	160
061 EMERGENCY	3,741,526	136	136	576,316		6,839,347	19,838
062 OBSERVATION BEDS (NON							
064 OTHER REIMBURS COST C							
065 HOME PROGRAM DIALYSIS							
066 AMBULANCE SERVICES							
067 DURABLE MEDICAL EQUIP							
069 CORF							
070 I&R SERVICES-NOT APPR							

COST CENTER DESCRIPTION	EMPLOYEE BENEFITS	NONPATIENT TELEPHONES	TELEPHONE DATA PROCESSING	PURCHASING, RECEIVING AND	OTHER ADMINISTRATIVE AND	MAINTENANCE & REPAIRS	
	(GROSS SALARIES)	(NUMBER OF PHONES)	(NUMBER OF PHONES)	(PURCHASED) EQ	(RECONCILIATION)	(ACCUM. COST)	(SQUARE FEET)
071 OTHER REIMBURS COST C	5	6.01	6.02	6.03	6a.04	6.04	7
082 HOME HEALTH AGENCY LUNG ACQUISITION SPEC PURPOSE COST CEN							
083 KIDNEY ACQUISITION							
084 LIVER ACQUISITION							
085 HEART ACQUISITION							
085 01 PANCREAS ACQUISITION							
086 OTHER ORGAN ACQUISITION							
092 AMBULATORY SURGICAL C							
093 HOSPICE							
095 SUBTOTALS	40,741,806	1,038	1,028	11,032,421	-10,909,485	101,985,566	214,830
096 NONREIMBURS COST CENT							
097 GIFT, FLOWER, COFFEE RESEARCH	86,000	6	6			374,762	
098 PHYSICIANS' PRIVATE O							
098 01 RETAIL PHARMACY	327,043	16	16			3,634,016	23,424
098 02 MARKETING	180,512	8	8			1,654,801	252
099 NONPAID WORKERS							
101 CROSS FOOT ADJUSTMENT							
102 NEGATIVE COST CENTER							
103 COST TO BE ALLOCATED (WRKSHT B, PART I)	10,040,898	864,016	5,518,124	880,643		10,909,485	8,005,315
104 UNIT COST MULTIPLIER (WRKSHT B, PT I)	.242913	809.003745	5,215.618147	.079823		.101343	33.564418
105 COST TO BE ALLOCATED (WRKSHT B, PART II)							
106 UNIT COST MULTIPLIER (WRKSHT B, PT II)							
107 COST TO BE ALLOCATED (WRKSHT B, PART III)	58,536	567,995	349,804	196,143		787,321	3,485,251
108 UNIT COST MULTIPLIER (WRKSHT B, PT III)	.001416	531.830524	330.627599	.017779		.007314	14.612844



COST CENTER DESCRIPTION	OPERATION OF PLANT	LAUNDRY & LINEN SERVICE	HOUSEKEEPING	DIETARY	CAFETERIA	MAINTENANCE PERSONNEL	NURSING ADMINISTRATION	
	(SQUARE FEET)	(POUNDS OF LAUNDRY)	(SQUARE FEET)	(PATIENT)	DAYS(FTES)	(NUMBER)HOUSED	(DIRECT)RS FTES	(NU)
	8	9	10	11	12	13	14	
071 OTHER REIMBURS COST C								
082 HOME HEALTH AGENCY								
083 LUNG ACQUISITION								
084 SPEC PURPOSE COST CEN								
085 KIDNEY ACQUISITION								
085 01 LIVER ACQUISITION								
086 01 HEART ACQUISITION								
092 01 PANCREAS ACQUISITION								
093 01 OTHER ORGAN ACQUISITI								
095 AMBULATORY SURGICAL C								
096 HOSPICE								
095 SUBTOTALS	211,685	1,003,377	206,495	29,825	57,216		32,443	
096 NONREIMBURS COST CENT								
097 GIFT, FLOWER, COFFEE					308			
097 RESEARCH								
098 PHYSICIANS' PRIVATE O								
098 01 RETAIL PHARMACY	23,424		23,424		518			
098 02 MARKETING	252		252		300			
099 NONPAID WORKERS								
101 CROSS FOOT ADJUSTMENT								
102 NEGATIVE COST CENTER								
103 COST TO BE ALLOCATED	1,927,934	621,754	4,356,903	3,088,819	446,730		3,131,207	
(WRKSHT B, PART I)								
104 UNIT COST MULTIPLIER		.619661		103.564761				
(WRKSHT B, PT I)	8.191391		18.928983		7.657091		96.514102	
105 COST TO BE ALLOCATED								
(WRKSHT B, PART II)								
106 UNIT COST MULTIPLIER								
(WRKSHT B, PT II)								
107 COST TO BE ALLOCATED	731,223	70,459	312,083	861,466	4,933		147,898	
(WRKSHT B, PART III)								
108 UNIT COST MULTIPLIER		.070222		28.884023				
(WRKSHT B, PT III)	3.106815		1.355875		.084553		4.558703	



COST CENTER DESCRIPTION	CENTRAL SERVICES & SUPPLY (PURCHASED EQ)	PHARMACY (COSTED)EQUI S.	MEDICAL RECORDS & LIBRARY (TIME)SPENT	SOCIAL SERVICE (PATIENT)YS	NONPHYSICIAN ANESTHETISTS (ASSIGNED) TIME	NURSING SCHOOL (ASSIGNED) TIME	I&R SERVICES-SALARY & FRI (ASSIGNED) TIME
	15	16	17	18	20	21	22
OTHER REIMBURS COST C							
071 HOME HEALTH AGENCY							
082 LUNG ACQUISITION							
SPEC PURPOSE COST CEN							
083 KIDNEY ACQUISITION							
084 LIVER ACQUISITION							
085 HEART ACQUISITION							
085 01 PANCREAS ACQUISITION							
086 OTHER ORGAN ACQUISITI							
092 AMBULATORY SURGICAL C							
093 HOSPICE							
095 SUBTOTALS	11,007,562	3,575,380		29,825			
NONREIMBURS COST CENT							
096 GIFT, FLOWER, COFFEE							
097 RESEARCH							
098 PHYSICIANS' PRIVATE O							
098 01 RETAIL PHARMACY							
098 02 MARKETING							
099 NONPAID WORKERS							
101 CROSS FOOT ADJUSTMENT							
102 NEGATIVE COST CENTER							
103 COST TO BE ALLOCATED (WRKSHT B, PART I)	7,084,431	6,401,895		284,194			
104 UNIT COST MULTIPLIER (WRKSHT B, PT I)	.643597	1.790550		9.528718			
105 COST TO BE ALLOCATED (WRKSHT B, PART II)							
106 UNIT COST MULTIPLIER (WRKSHT B, PT II)							
107 COST TO BE ALLOCATED (WRKSHT B, PART III)	634,040	228,620		7,387			
108 UNIT COST MULTIPLIER (WRKSHT B, PT III)	.057600	.063943		.247678			

COST CENTER DESCRIPTION		I&R SERVICES- OTHER PRGM	PARAMED PRGM
		(ASSIGNED TIME )	(ASSIGNED TIME )
	GENERAL SERVICE COST	23	24
001	OLD CAP REL COSTS-BLD		
002	OLD CAP REL COSTS-MVB		
003	NEW CAP REL COSTS-BLD		
003	01 MOB		
003	02 INTEREST		
004	NEW CAP REL COSTS-MVB		
005	EMPLOYEE BENEFITS		
006	01 NONPATIENT TELEPHONES		
006	02 DATA PROCESSING		
006	03 PURCHASING, RECEIVING		
006	04 OTHER ADMINISTRATIVE		
007	MAINTENANCE & REPAIRS		
008	OPERATION OF PLANT		
009	LAUNDRY & LINEN SERVICE		
010	HOUSEKEEPING		
011	DIETARY		
012	CAFETERIA		
013	MAINTENANCE OF PERSON		
014	NURSING ADMINISTRATION		
015	CENTRAL SERVICES & SUPPLY		
016	PHARMACY		
017	MEDICAL RECORDS & LIBRARY		
018	SOCIAL SERVICE		
020	NONPHYSICIAN ANESTHESIA		
021	NURSING SCHOOL		
022	I&R SERVICES-SALARY & BENEFITS		
023	I&R SERVICES-OTHER PARAMED PRGM		
024	PARAMED PRGM		
025	INPAT ROUTINE SRVC CNTR		
026	ADULTS & PEDIATRICS		
027	INTENSIVE CARE UNIT		
027	CORONARY CARE UNIT		
028	BURN INTENSIVE CARE UNIT		
029	SURGICAL INTENSIVE CARE		
031	SUBPROVIDER		
033	NURSERY		
034	SKILLED NURSING FACILITY		
035	NURSING FACILITY		
035	01 ICF/MR		
036	OTHER LONG TERM CARE		
037	ANCILLARY SRVC COST CENTER		
037	OPERATING ROOM		
038	RECOVERY ROOM		
039	DELIVERY ROOM & LABOR		
040	ANESTHESIOLOGY		
041	RADIOLOGY-DIAGNOSTIC		
042	RADIOLOGY-THERAPEUTIC		
043	RADIOISOTOPE		
044	LABORATORY		
045	PBP CLINICAL LAB SERVICE		
046	WHOLE BLOOD & PACKED		
047	BLOOD STORAGE, PROCESSING		
048	INTRAVENOUS THERAPY		
049	RESPIRATORY THERAPY		
050	PHYSICAL THERAPY		
051	OCCUPATIONAL THERAPY		
052	SPEECH PATHOLOGY		
053	ELECTROCARDIOLOGY		
054	ELECTROENCEPHALOGRAPHY		
055	MEDICAL SUPPLIES CHARGE		
055	30 IMPL. DEV. CHARGED TO PATIENT		
056	DRUGS CHARGED TO PATIENT		
057	RENAL DIALYSIS		
058	ASC (NON-DISTINCT PAR)		
058	01 ASC (NON-DISTINCT PAR)		
059	CARDIAC CATHETERIZATION		
059	97 CARDIAC REHABILITATION		
060	OUTPAT SERVICE COST CENTER		
060	CLINIC		
060	01 CLINIC		
060	02 SLEEP LAB		
061	EMERGENCY		
062	OBSERVATION BEDS (NON-REIMBURS)		
064	OTHER REIMBURS COST CENTER		
064	HOME PROGRAM DIALYSIS		
065	AMBULANCE SERVICES		
066	DURABLE MEDICAL EQUIPMENT		
067	DURABLE MEDICAL EQUIPMENT		
069	CORF		
070	I&R SERVICES-NOT APPROPRIATE		

COST CENTER DESCRIPTION	I&R SERVICES- OTHER PRGM C GM	(ASSIGNED TIME )	(ASSIGNED TIME )
		23	24
071 OTHER REIMBURS COST C			
082 HOME HEALTH AGENCY			
083 LUNG ACQUISITION			
084 SPEC PURPOSE COST CEN			
085 KIDNEY ACQUISITION			
085 01 LIVER ACQUISITION			
086 HEART ACQUISITION			
085 01 PANCREAS ACQUISITION			
086 OTHER ORGAN ACQUISITI			
092 AMBULATORY SURGICAL C			
093 HOSPICE			
095 SUBTOTALS			
096 NONREIMBURS COST CENT			
097 GIFT, FLOWER, COFFEE			
098 RESEARCH			
098 01 PHYSICIANS' PRIVATE O			
098 01 RETAIL PHARMACY			
098 02 MARKETING			
099 NONPAID WORKERS			
101 CROSS FOOT ADJUSTMENT			
102 NEGATIVE COST CENTER			
103 COST TO BE ALLOCATED			
104 (PER WRKSHT B, PART			
UNIT COST MULTIPLIER			
(WRKSHT B, PT I)			
105 COST TO BE ALLOCATED			
(PER WRKSHT B, PART			
106 UNIT COST MULTIPLIER			
(WRKSHT B, PT II)			
107 COST TO BE ALLOCATED			
(PER WRKSHT B, PART			
108 UNIT COST MULTIPLIER			
(WRKSHT B, PT III)			

## COMPUTATION OF RATIO OF COSTS TO CHARGES

WKST A LINE NO.	COST CENTER DESCRIPTION	WKST B, PT I COL. 27 1	THERAPY ADJUSTMENT 2	TOTAL COSTS 3	RCE DI ALLOWANCE 4	TOTAL COSTS 5
	INPAT ROUTINE SRVC CNTRS					
25	ADULTS & PEDIATRICS	35,919,042		35,919,042		35,919,042
26	INTENSIVE CARE UNIT	6,802,677		6,802,677		6,802,677
27	CORONARY CARE UNIT					
28	BURN INTENSIVE CARE UNIT					
29	SURGICAL INTENSIVE CARE U					
31	SUBPROVIDER					
33	NURSERY	3,709,173		3,709,173		3,709,173
34	SKILLED NURSING FACILITY					
35	NURSING FACILITY					
35	01 ICF/MR					
36	OTHER LONG TERM CARE					
	ANCILLARY SRVC COST CNTRS					
37	OPERATING ROOM	13,056,009		13,056,009		13,056,009
38	RECOVERY ROOM	2,592,212		2,592,212		2,592,212
39	DELIVERY ROOM & LABOR ROO					
40	ANESTHESIOLOGY					
41	RADIOLOGY-DIAGNOSTIC	8,728,818		8,728,818		8,728,818
42	RADIOLOGY-THERAPEUTIC	3,497,257		3,497,257		3,497,257
43	RADIOISOTOPE					
44	LABORATORY	6,845,951		6,845,951		6,845,951
45	PBP CLINICAL LAB SERVICES					
46	WHOLE BLOOD & PACKED RED					
47	BLOOD STORING, PROCESSING					
48	INTRAVENOUS THERAPY					
49	RESPIRATORY THERAPY	1,993,489		1,993,489		1,993,489
50	PHYSICAL THERAPY	1,930,182		1,930,182		1,930,182
51	OCCUPATIONAL THERAPY	425,650		425,650		425,650
52	SPEECH PATHOLOGY	197,408		197,408		197,408
53	ELECTROCARDIOLOGY	1,168,692		1,168,692		1,168,692
54	ELECTROENCEPHALOGRAPHY					
55	MEDICAL SUPPLIES CHARGED	2,096,852		2,096,852		2,096,852
55	30 IMPL. DEV. CHARGED TO PAT	4,190,432		4,190,432		4,190,432
56	DRUGS CHARGED TO PATIENTS	5,209,275		5,209,275		5,209,275
57	RENAL DIALYSIS					
58	ASC (NON-DISTINCT PART)	1,495,238		1,495,238		1,495,238
58	01 ASC (NON-DISTINCT PART)					
59	CARDIAC CATHETERIZATION L					
59	97 CARDIAC REHABILITATION	150,953		150,953		150,953
	OUTPAT SERVICE COST CNTRS					
60	CLINIC					
60	01 CLINIC					
60	02 SLEEP LAB	966,662		966,662		966,662
61	EMERGENCY	9,899,722		9,899,722		9,899,722
62	OBSERVATION BEDS (NON-DIS	1,758,338		1,758,338		1,758,338
	OTHER REIMBURS COST CNTRS					
64	HOME PROGRAM DIALYSIS					
65	AMBULANCE SERVICES					
66	DURABLE MEDICAL EQUIP-REN					
67	DURABLE MEDICAL EQUIP-SOL					
101	SUBTOTAL	112,634,032		112,634,032		112,634,032
102	LESS OBSERVATION BEDS	1,758,338		1,758,338		1,758,338
103	TOTAL	110,875,694		110,875,694		110,875,694

COMPUTATION OF RATIO OF COSTS TO CHARGES

WKST A LINE NO.	COST CENTER DESCRIPTION	INPATIENT CHARGES 6	OUTPATIENT CHARGES 7	TOTAL CHARGES 8	COST OR OTHER RATIO 9	TEFRA INPAT- IENT RATIO 10	PPS INPAT- IENT RATIO 11
	INPAT ROUTINE SRVC CNTRS						
25	ADULTS & PEDIATRICS	38,555,704		38,555,704			
26	INTENSIVE CARE UNIT	10,814,679		10,814,679			
27	CORONARY CARE UNIT						
28	BURN INTENSIVE CARE UNIT						
29	SURGICAL INTENSIVE CARE U						
31	SUBPROVIDER						
33	NURSERY	3,523,591		3,523,591			
34	SKILLED NURSING FACILITY						
35	NURSING FACILITY						
36	01 ICF/MR						
	OTHER LONG TERM CARE						
	ANCILLARY SRVC COST CNTRS						
37	OPERATING ROOM	17,014,246	29,505,671	46,519,917	.280654	.280654	.280654
38	RECOVERY ROOM	1,703,875	5,689,228	7,393,103	.350626	.350626	.350626
39	DELIVERY ROOM & LABOR ROO						
40	ANESTHESIOLOGY						
41	RADIOLOGY-DIAGNOSTIC	14,946,273	51,429,078	66,375,351	.131507	.131507	.131507
42	RADIOLOGY-THERAPEUTIC	326,845	11,823,219	12,150,064	.287839	.287839	.287839
43	RADIOISOTOPE						
44	LABORATORY	23,863,291	26,867,568	50,730,859	.134946	.134946	.134946
45	PBP CLINICAL LAB SERVICES						
46	WHOLE BLOOD & PACKED RED						
47	BLOOD STORING, PROCESSING						
48	INTRAVENOUS THERAPY						
49	RESPIRATORY THERAPY	3,968,608	970,655	4,939,263	.403600	.403600	.403600
50	PHYSICAL THERAPY	1,657,698	3,713,642	5,371,340	.359348	.359348	.359348
51	OCCUPATIONAL THERAPY	613,197	421,372	1,034,569	.411427	.411427	.411427
52	SPEECH PATHOLOGY	186,964	228,858	415,822	.474742	.474742	.474742
53	ELECTROCARDIOLOGY	7,437,042	7,565,414	15,002,456	.077900	.077900	.077900
54	ELECTROENCEPHALOGRAPHY						
55	MEDICAL SUPPLIES CHARGED	1,805,808	1,118,055	2,923,863	.717151	.717151	.717151
55	30 IMPL. DEV. CHARGED TO PAT	9,402,193	4,914,421	14,316,614	.292697	.292697	.292697
56	DRUGS CHARGED TO PATIENTS	21,321,118	7,534,534	28,855,652	.180529	.180529	.180529
57	RENAL DIALYSIS						
58	ASC (NON-DI STINCT PART)						
58	01 ASC (NON-DI STINCT PART)	3,500,531	3,341,134	6,841,665	.218549	.218549	.218549
59	CARDIAC CATHETERIZATION L						
59	97 CARDIAC REHABILITATION	1,442	301,604	303,046	.498119	.498119	.498119
60	OUTPAT SERVICE COST CNTRS						
60	01 CLINIC						
60	02 SLEEP LAB	140,643	7,440,995	7,581,638	.127500	.127500	.127500
61	EMERGENCY	12,383,072	50,870,544	63,253,616	.156508	.156508	.156508
62	OBSERVATION BEDS (NON-DIS	296,191	1,194,048	1,490,239	1.179903	1.179903	1.179903
64	OTHER REIMBURS COST CNTRS						
64	HOME PROGRAM DIALYSIS						
65	AMBULANCE SERVICES						
66	DURABLE MEDICAL EQUIP-REN						
67	DURABLE MEDICAL EQUIP-SOL						
101	SUBTOTAL	173,463,011	214,930,040	388,393,051			
102	LESS OBSERVATION BEDS						
103	TOTAL	173,463,011	214,930,040	388,393,051			

COMPUTATION OF RATIO OF COSTS TO CHARGES  
SPECIAL TITLE XIX WORKSHEET

WKST A LINE NO.	COST CENTER DESCRIPTION	WKST B, PT I COL. 27 1	THERAPY ADJUSTMENT 2	TOTAL COSTS 3	RCE DI ALLOWANCE 4	TOTAL COSTS 5
	INPAT ROUTINE SRVC CNTRS					
25	ADULTS & PEDIATRICS	35,919,042		35,919,042		35,919,042
26	INTENSIVE CARE UNIT	6,802,677		6,802,677		6,802,677
27	CORONARY CARE UNIT					
28	BURN INTENSIVE CARE UNIT					
29	SURGICAL INTENSIVE CARE U					
31	SUBPROVIDER					
33	NURSERY	3,709,173		3,709,173		3,709,173
34	SKILLED NURSING FACILITY					
35	NURSING FACILITY					
35	01 ICF/MR					
36	OTHER LONG TERM CARE					
	ANCILLARY SRVC COST CNTRS					
37	OPERATING ROOM	13,056,009		13,056,009		13,056,009
38	RECOVERY ROOM	2,592,212		2,592,212		2,592,212
39	DELIVERY ROOM & LABOR ROO					
40	ANESTHESIOLOGY					
41	RADIOLOGY-DIAGNOSTIC	8,728,818		8,728,818		8,728,818
42	RADIOLOGY-THERAPEUTIC	3,497,257		3,497,257		3,497,257
43	RADIOISOTOPE					
44	LABORATORY	6,845,951		6,845,951		6,845,951
45	PBP CLINICAL LAB SERVICES					
46	WHOLE BLOOD & PACKED RED					
47	BLOOD STORING, PROCESSING					
48	INTRAVENOUS THERAPY					
49	RESPIRATORY THERAPY	1,993,489		1,993,489		1,993,489
50	PHYSICAL THERAPY	1,930,182		1,930,182		1,930,182
51	OCCUPATIONAL THERAPY	425,650		425,650		425,650
52	SPEECH PATHOLOGY	197,408		197,408		197,408
53	ELECTROCARDIOLOGY	1,168,692		1,168,692		1,168,692
54	ELECTROENCEPHALOGRAPHY					
55	MEDICAL SUPPLIES CHARGED	2,096,852		2,096,852		2,096,852
55	30 IMPL. DEV. CHARGED TO PAT	4,190,432		4,190,432		4,190,432
56	DRUGS CHARGED TO PATIENTS	5,209,275		5,209,275		5,209,275
57	RENAL DIALYSIS					
58	ASC (NON-DISTINCT PART)					
58	01 ASC (NON-DISTINCT PART)	1,495,238		1,495,238		1,495,238
59	CARDIAC CATHETERIZATION L					
59	97 CARDIAC REHABILITATION	150,953		150,953		150,953
	OUTPAT SERVICE COST CNTRS					
60	CLINIC					
60	01 CLINIC					
60	02 SLEEP LAB	966,662		966,662		966,662
61	EMERGENCY	9,899,722		9,899,722		9,899,722
62	OBSERVATION BEDS (NON-DIS	1,758,338		1,758,338		1,758,338
	OTHER REIMBURS COST CNTRS					
64	HOME PROGRAM DIALYSIS					
65	AMBULANCE SERVICES					
66	DURABLE MEDICAL EQUIP-REN					
67	DURABLE MEDICAL EQUIP-SOL					
101	SUBTOTAL	112,634,032		112,634,032		112,634,032
102	LESS OBSERVATION BEDS	1,758,338		1,758,338		1,758,338
103	TOTAL	110,875,694		110,875,694		110,875,694

COMPUTATION OF RATIO OF COSTS TO CHARGES  
SPECIAL TITLE XIX WORKSHEET

WKST A LINE NO.	COST CENTER DESCRIPTION	INPATIENT CHARGES 6	OUTPATIENT CHARGES 7	TOTAL CHARGES 8	COST OR OTHER RATIO 9	TEFRA INPAT- IENT RATIO 10	PPS INPAT- IENT RATIO 11
	INPAT ROUTINE SRVC CNTRS						
25	ADULTS & PEDIATRICS	38,555,704		38,555,704			
26	INTENSIVE CARE UNIT	10,814,679		10,814,679			
27	CORONARY CARE UNIT						
28	BURN INTENSIVE CARE UNIT						
29	SURGICAL INTENSIVE CARE U						
31	SUBPROVIDER						
33	NURSERY	3,523,591		3,523,591			
34	SKILLED NURSING FACILITY						
35	NURSING FACILITY						
35	01 ICF/MR						
36	OTHER LONG TERM CARE						
	ANCILLARY SRVC COST CNTRS						
37	OPERATING ROOM	17,014,246	29,505,671	46,519,917	.280654	.280654	.280654
38	RECOVERY ROOM	1,703,875	5,689,228	7,393,103	.350626	.350626	.350626
39	DELIVERY ROOM & LABOR ROO						
40	ANESTHESIOLOGY						
41	RADIOLOGY-DIAGNOSTIC	14,946,273	51,429,078	66,375,351	.131507	.131507	.131507
42	RADIOLOGY-THERAPEUTIC	326,845	11,823,219	12,150,064	.287839	.287839	.287839
43	RADIOISOTOPE						
44	LABORATORY	23,863,291	26,867,568	50,730,859	.134946	.134946	.134946
45	PBP CLINICAL LAB SERVICES						
46	WHOLE BLOOD & PACKED RED						
47	BLOOD STORING, PROCESSING						
48	INTRAVENOUS THERAPY						
49	RESPIRATORY THERAPY	3,968,608	970,655	4,939,263	.403600	.403600	.403600
50	PHYSICAL THERAPY	1,657,698	3,713,642	5,371,340	.359348	.359348	.359348
51	OCCUPATIONAL THERAPY	613,197	421,372	1,034,569	.411427	.411427	.411427
52	SPEECH PATHOLOGY	186,964	228,858	415,822	.474742	.474742	.474742
53	ELECTROCARDIOLOGY	7,437,042	7,565,414	15,002,456	.077900	.077900	.077900
54	ELECTROENCEPHALOGRAPHY						
55	MEDICAL SUPPLIES CHARGED	1,805,808	1,118,055	2,923,863	.717151	.717151	.717151
55	30 IMPL. DEV. CHARGED TO PAT	9,402,193	4,914,421	14,316,614	.292697	.292697	.292697
56	DRUGS CHARGED TO PATIENTS	21,321,118	7,534,534	28,855,652	.180529	.180529	.180529
57	RENAL DIALYSIS						
58	ASC (NON-DI STINCT PART)						
58	01 ASC (NON-DI STINCT PART)	3,500,531	3,341,134	6,841,665	.218549	.218549	.218549
59	CARDIAC CATHETERIZATION L						
59	97 CARDIAC REHABILITATION	1,442	301,604	303,046	.498119	.498119	.498119
60	OUTPAT SERVICE COST CNTRS						
60	CLINIC						
60	01 CLINIC						
60	02 SLEEP LAB	140,643	7,440,995	7,581,638	.127500	.127500	.127500
61	EMERGENCY	12,383,072	50,870,544	63,253,616	.156508	.156508	.156508
62	OBSERVATION BEDS (NON-DIS	296,191	1,194,048	1,490,239	1.179903	1.179903	1.179903
64	OTHER REIMBURS COST CNTRS						
64	HOME PROGRAM DIALYSIS						
65	AMBULANCE SERVICES						
66	DURABLE MEDICAL EQUIP-REN						
67	DURABLE MEDICAL EQUIP-SOL						
101	SUBTOTAL	173,463,011	214,930,040	388,393,051			
102	LESS OBSERVATION BEDS						
103	TOTAL	173,463,011	214,930,040	388,393,051			

WKST A LINE NO.	COST CENTER DESCRIPTION	TOTAL COST WKST B, PT I COL. 27 1	CAPITAL COST WKST B PT II & III, COL. 27 2	OPERATING COST NET OF CAPITAL COST 3	CAPITAL REDUCTION 4	OPERATING COST REDUCTION AMOUNT 5	COST NET OF CAP AND OPER COST REDUCTION 6
37	ANCILLARY SRVC COST CNTRS						
	OPERATING ROOM	13,056,009	3,469,841	9,586,168			13,056,009
38	RECOVERY ROOM	2,592,212	189,896	2,402,316			2,592,212
39	DELIVERY ROOM & LABOR ROO						
40	ANESTHESIOLOGY						
41	RADIOLOGY-DIAGNOSTIC	8,728,818	2,174,717	6,554,101			8,728,818
42	RADIOLOGY-THERAPEUTIC	3,497,257	1,519,950	1,977,307			3,497,257
43	RADIOISOTOPE						
44	LABORATORY	6,845,951	560,175	6,285,776			6,845,951
45	PBP CLINICAL LAB SERVICES						
46	WHOLE BLOOD & PACKED RED						
47	BLOOD STORING, PROCESSING						
48	INTRAVENOUS THERAPY						
49	RESPIRATORY THERAPY	1,993,489	132,556	1,860,933			1,993,489
50	PHYSICAL THERAPY	1,930,182	132,634	1,797,548			1,930,182
51	OCCUPATIONAL THERAPY	425,650	87,322	338,328			425,650
52	SPEECH PATHOLOGY	197,408	83,785	113,623			197,408
53	ELECTROCARDIOLOGY	1,168,692	303,639	865,053			1,168,692
54	ELECTROENCEPHALOGRAPHY						
55	MEDICAL SUPPLIES CHARGED	2,096,852	13,925	2,082,927			2,096,852
55	30 IMPL. DEV. CHARGED TO PAT	4,190,432	27,829	4,162,603			4,190,432
56	DRUGS CHARGED TO PATIENTS	5,209,275	186,030	5,023,245			5,209,275
57	RENAL DIALYSIS						
58	ASC (NON-DISTINCT PART)						
58	01 ASC (NON-DISTINCT PART)	1,495,238	249,198	1,246,040			1,495,238
59	CARDIAC CATHETERIZATION L						
59	97 CARDIAC REHABILITATION	150,953	17,685	133,268			150,953
	OUTPAT SERVICE COST CNTRS						
60	CLINIC						
60	01 CLINIC						
60	02 SLEEP LAB	966,662	73,049	893,613			966,662
61	EMERGENCY	9,899,722	1,626,587	8,273,135			9,899,722
62	OBSERVATION BEDS (NON-DIS	1,758,338	395,095	1,363,243			1,758,338
	OTHER REIMBURS COST CNTRS						
64	HOME PROGRAM DIALYSIS						
65	AMBULANCE SERVICES						
66	DURABLE MEDICAL EQUIP-REN						
67	DURABLE MEDICAL EQUIP-SOL						
101	SUBTOTAL	66,203,140	11,243,913	54,959,227			66,203,140
102	LESS OBSERVATION BEDS	1,758,338	395,095	1,363,243			1,758,338
103	TOTAL	64,444,802	10,848,818	53,595,984			64,444,802

WKST A LINE NO.	COST CENTER DESCRIPTION	TOTAL CHARGES	OUTPAT COST TO CHRG RATIO	I/P PT B COST TO CHRG RATIO
		7	8	9
37	ANCILLARY SRVC COST CNTRS			
	OPERATING ROOM	46,519,917	.280654	.280654
38	RECOVERY ROOM	7,393,103	.350626	.350626
39	DELIVERY ROOM & LABOR ROO			
40	ANESTHESIOLOGY			
41	RADIOLOGY-DIAGNOSTIC	66,375,351	.131507	.131507
42	RADIOLOGY-THERAPEUTIC	12,150,064	.287839	.287839
43	RADIOISOTOPE			
44	LABORATORY	50,730,859	.134946	.134946
45	PBP CLINICAL LAB SERVICES			
46	WHOLE BLOOD & PACKED RED			
47	BLOOD STORING, PROCESSING			
48	INTRAVENOUS THERAPY			
49	RESPIRATORY THERAPY	4,939,263	.403600	.403600
50	PHYSICAL THERAPY	5,371,340	.359348	.359348
51	OCCUPATIONAL THERAPY	1,034,569	.411427	.411427
52	SPEECH PATHOLOGY	415,822	.474742	.474742
53	ELECTROCARDIOLOGY	15,002,456	.077900	.077900
54	ELECTROENCEPHALOGRAPHY			
55	MEDICAL SUPPLIES CHARGED	2,923,863	.717151	.717151
55	30 IMPL. DEV. CHARGED TO PAT	14,316,614	.292697	.292697
56	DRUGS CHARGED TO PATIENTS	28,855,652	.180529	.180529
57	RENAL DIALYSIS			
58	ASC (NON-DISTINCT PART)			
58	01 ASC (NON-DISTINCT PART)	6,841,665	.218549	.218549
59	CARDIAC CATHETERIZATION L			
59	97 CARDIAC REHABILITATION	303,046	.498119	.498119
60	OUTPAT SERVICE COST CNTRS			
60	CLINIC			
60	01 CLINIC			
60	02 SLEEP LAB	7,581,638	.127500	.127500
61	EMERGENCY	63,253,616	.156508	.156508
62	OBSERVATION BEDS (NON-DIS	1,490,239	1.179903	1.179903
64	OTHER REIMBURS COST CNTRS			
64	HOME PROGRAM DIALYSIS			
65	AMBULANCE SERVICES			
66	DURABLE MEDICAL EQUIP-REN			
67	DURABLE MEDICAL EQUIP-SOL			
101	SUBTOTAL	335,499,077		
102	LESS OBSERVATION BEDS	1,490,239		
103	TOTAL	334,008,838		

WKST A LINE NO.	COST CENTER DESCRIPTION	TOTAL COST WKST B, PT I COL. 27 1	CAPITAL COST WKST B PT II & III, COL. 27 2	OPERATING COST NET OF CAPITAL COST 3	CAPITAL REDUCTION 4	OPERATING COST REDUCTION AMOUNT 5	COST NET OF CAP AND OPER COST REDUCTION 6
37	ANCILLARY SRVC COST CNTRS						
	OPERATING ROOM	13,056,009	3,469,841	9,586,168	346,984	555,998	12,153,027
38	RECOVERY ROOM	2,592,212	189,896	2,402,316	18,990	139,334	2,433,888
39	DELIVERY ROOM & LABOR ROO						
40	ANESTHESIOLOGY						
41	RADIOLOGY-DIAGNOSTIC	8,728,818	2,174,717	6,554,101	217,472	380,138	8,131,208
42	RADIOLOGY-THERAPEUTIC	3,497,257	1,519,950	1,977,307	151,995	114,684	3,230,578
43	RADIOISOTOPE						
44	LABORATORY	6,845,951	560,175	6,285,776	56,018	364,575	6,425,358
45	PBP CLINICAL LAB SERVICES						
46	WHOLE BLOOD & PACKED RED						
47	BLOOD STORING, PROCESSING						
48	INTRAVENOUS THERAPY						
49	RESPIRATORY THERAPY	1,993,489	132,556	1,860,933	13,256	107,934	1,872,299
50	PHYSICAL THERAPY	1,930,182	132,634	1,797,548	13,263	104,258	1,812,661
51	OCCUPATIONAL THERAPY	425,650	87,322	338,328	8,732	19,623	397,295
52	SPEECH PATHOLOGY	197,408	83,785	113,623	8,379	6,590	182,439
53	ELECTROCARDIOLOGY	1,168,692	303,639	865,053	30,364	50,173	1,088,155
54	ELECTROENCEPHALOGRAPHY						
55	MEDICAL SUPPLIES CHARGED	2,096,852	13,925	2,082,927	1,393	120,810	1,974,649
55	30 IMPL. DEV. CHARGED TO PAT	4,190,432	27,829	4,162,603	2,783	241,431	3,946,218
56	DRUGS CHARGED TO PATIENTS	5,209,275	186,030	5,023,245	18,603	291,348	4,899,324
57	RENAL DIALYSIS						
58	ASC (NON-DISTINCT PART)						
58	01 ASC (NON-DISTINCT PART)	1,495,238	249,198	1,246,040	24,920	72,270	1,398,048
59	CARDIAC CATHETERIZATION L						
59	97 CARDIAC REHABILITATION	150,953	17,685	133,268	1,769	7,730	141,454
	OUTPAT SERVICE COST CNTRS						
60	CLINIC						
60	01 CLINIC						
60	02 SLEEP LAB	966,662	73,049	893,613	7,305	51,830	907,527
61	EMERGENCY	9,899,722	1,626,587	8,273,135	162,659	479,842	9,257,221
62	OBSERVATION BEDS (NON-DIS	1,758,338	395,095	1,363,243	39,510	79,068	1,639,760
	OTHER REIMBURS COST CNTRS						
64	HOME PROGRAM DIALYSIS						
65	AMBULANCE SERVICES						
66	DURABLE MEDICAL EQUIP-REN						
67	DURABLE MEDICAL EQUIP-SOL						
101	SUBTOTAL	66,203,140	11,243,913	54,959,227	1,124,395	3,187,636	61,891,109
102	LESS OBSERVATION BEDS	1,758,338	395,095	1,363,243	39,510	79,068	1,639,760
103	TOTAL	64,444,802	10,848,818	53,595,984	1,084,885	3,108,568	60,251,349

WKST A LINE NO.	COST CENTER DESCRIPTION	TOTAL CHARGES	OUTPAT COST TO CHRGRATIO	I/P PT B COST TO CHRGRATIO
		7	8	9
37	ANCILLARY SRVC COST CNTRS			
	OPERATING ROOM	46,519,917	.261244	.273195
38	RECOVERY ROOM	7,393,103	.329211	.348057
39	DELIVERY ROOM & LABOR ROO			
40	ANESTHESIOLOGY			
41	RADIOLOGY-DIAGNOSTIC	66,375,351	.122503	.128231
42	RADIOLOGY-THERAPEUTIC	12,150,064	.265890	.275329
43	RADIOISOTOPE			
44	LABORATORY	50,730,859	.126656	.133842
45	PBP CLINICAL LAB SERVICES			
46	WHOLE BLOOD & PACKED RED			
47	BLOOD STORING, PROCESSING			
48	INTRAVENOUS THERAPY			
49	RESPIRATORY THERAPY	4,939,263	.379064	.400917
50	PHYSICAL THERAPY	5,371,340	.337469	.356879
51	OCCUPATIONAL THERAPY	1,034,569	.384020	.402987
52	SPEECH PATHOLOGY	415,822	.438743	.454591
53	ELECTROCARDIOLOGY	15,002,456	.072532	.075876
54	ELECTROENCEPHALOGRAPHY			
55	MEDICAL SUPPLIES CHARGED	2,923,863	.675356	.716675
55	30 IMPL. DEV. CHARGED TO PAT	14,316,614	.275639	.292503
56	DRUGS CHARGED TO PATIENTS	28,855,652	.169787	.179884
57	RENAL DIALYSIS			
58	ASC (NON-DISTINCT PART)			
58	01 ASC (NON-DISTINCT PART)	6,841,665	.204343	.214906
59	CARDIAC CATHETERIZATION L			
59	97 CARDIAC REHABILITATION	303,046	.466774	.492282
60	OUTPAT SERVICE COST CNTRS			
60	CLINIC			
60	01 CLINIC			
60	02 SLEEP LAB	7,581,638	.119701	.126537
61	EMERGENCY	63,253,616	.146351	.153937
62	OBSERVATION BEDS (NON-DIS	1,490,239	1.100334	1.153391
	OTHER REIMBURS COST CNTRS			
64	HOME PROGRAM DIALYSIS			
65	AMBULANCE SERVICES			
66	DURABLE MEDICAL EQUIP-REN			
67	DURABLE MEDICAL EQUIP-SOL			
101	SUBTOTAL	335,499,077		
102	LESS OBSERVATION BEDS	1,490,239		
103	TOTAL	334,008,838		

PPS

WKST A LINE NO.	COST CENTER DESCRIPTION	OLD CAPITAL			NEW CAPITAL		
		CAPITAL REL COST (B, 11) 1	SWING BED ADJUSTMENT 2	REDUCED CAP RELATED COST 3	CAPITAL REL COST (B, 111) 4	SWING BED ADJUSTMENT 5	REDUCED CAP RELATED COST 6
25	INPAT ROUTINE SRVC CNTRS ADULTS & PEDIATRICS				8,070,941		8,070,941
26	INTENSIVE CARE UNIT				817,272		817,272
27	CORONARY CARE UNIT						
28	BURN INTENSIVE CARE UNIT						
29	SURGICAL INTENSIVE CARE U						
31	SUBPROVIDER						
33	NURSERY				565,923		565,923
101	TOTAL				9,454,136		9,454,136



APPORTIONMENT OF INPATIENT ANCILLARY SERVICE CAPITAL COSTS

PROVIDER NO: 15-0158  
 COMPONENT NO: 15-0158  
 PERIOD: FROM 1/1/2010 TO 12/31/2010  
 PREPARED 6/20/2011  
 WORKSHEET D  
 PART II

TITLE XVIII, PART A

HOSPITAL

PPS

WKST A LINE NO.	COST CENTER DESCRIPTION	OLD CAPITAL RELATED COST 1	NEW CAPITAL RELATED COST 2	TOTAL CHARGES 3	INPAT PROGRAM CHARGES 4	OLD CAPITAL CST/CHRG RATIO 5	COSTS 6
37	ANCILLARY SRVC COST CNTRS						
	OPERATING ROOM		3,469,841	46,519,917	5,761,285		
38	RECOVERY ROOM		189,896	7,393,103	540,541		
39	DELIVERY ROOM & LABOR ROO						
40	ANESTHESIOLOGY						
41	RADIOLOGY-DIAGNOSTIC		2,174,717	66,375,351	6,802,028		
42	RADIOLOGY-THERAPEUTIC		1,519,950	12,150,064	100,929		
43	RADIOISOTOPE						
44	LABORATORY		560,175	50,730,859	10,962,639		
45	PBP CLINICAL LAB SERVICES						
46	WHOLE BLOOD & PACKED RED						
47	BLOOD STORING, PROCESSING						
48	INTRAVENOUS THERAPY						
49	RESPIRATORY THERAPY		132,556	4,939,263	2,079,340		
50	PHYSICAL THERAPY		132,634	5,371,340	931,700		
51	OCCUPATIONAL THERAPY		87,322	1,034,569	365,428		
52	SPEECH PATHOLOGY		83,785	415,822	119,644		
53	ELECTROCARDIOLOGY		303,639	15,002,456	4,024,987		
54	ELECTROENCEPHALOGRAPHY						
55	MEDICAL SUPPLIES CHARGED		13,925	2,923,863	725,247		
55	30 IMPL. DEV. CHARGED TO PAT		27,829	14,316,614	3,883,828		
56	DRUGS CHARGED TO PATIENTS		186,030	28,855,652	8,774,872		
57	RENAL DIALYSIS						
58	ASC (NON-DISTINCT PART)						
58	01 ASC (NON-DISTINCT PART)		249,198	6,841,665	1,204,927		
59	CARDIAC CATHETERIZATION L						
59	97 CARDIAC REHABILITATION		17,685	303,046	390		
	OUTPAT SERVICE COST CNTRS						
60	CLINIC						
60	01 CLINIC						
60	02 SLEEP LAB		73,049	7,581,638	62,198		
61	EMERGENCY		1,626,587	63,253,616	5,537,193		
62	OBSERVATION BEDS (NON-DIS		395,095	1,490,239	103,314		
	OTHER REIMBURS COST CNTRS						
64	HOME PROGRAM DIALYSIS						
65	AMBULANCE SERVICES						
66	DURABLE MEDICAL EQUIP-REN						
67	DURABLE MEDICAL EQUIP-SOL						
101	TOTAL		11,243,913	335,499,077	51,980,490		



APPORTIONMENT OF INPATIENT ROUTINE  
SERVICE OTHER PASS THROUGH COSTS  
TITLE XVIII, PART A

PROVIDER NO: 15-0158  
PERIOD: FROM 1/1/2010 TO 12/31/2010  
PREPARED 6/20/2011  
WORKSHEET D  
PART III

PPS

WKST A LINE NO.	COST CENTER DESCRIPTION	NONPHYSICIAN ANESTHETIST 1	MED EDUCATN COST 2	SWING BED ADJ AMOUNT 3	TOTAL COSTS 4	TOTAL PATIENT DAYS 5	PER DIEM 6
25	INPAT ROUTINE SRVC CNTRS ADULTS & PEDIATRICS					23,063	
26	INTENSIVE CARE UNIT					4,449	
27	CORONARY CARE UNIT						
28	BURN INTENSIVE CARE UNIT						
29	SURGICAL INTENSIVE CARE U						
31	SUBPROVIDER						
33	NURSERY					3,442	
34	SKILLED NURSING FACILITY						
35	NURSING FACILITY						
35 01	ICF/MR						
101	TOTAL					30,954	

APPORTIONMENT OF INPATIENT ROUTINE  
SERVICE OTHER PASS THROUGH COSTS  
TITLE XVIII, PART A

PROVIDER NO:	PERIOD:	PREPARED
15-0158	FROM 1/ 1/2010	6/20/2011
	TO 12/31/2010	WORKSHEET D
		PART III

WKST A LINE NO.	COST CENTER DESCRIPTION	INPATIENT	INPAT PROGRAM
		PROG DAYS	PASS THRU COST
		7	8
25	ADULTS & PEDIATRICS	10,872	
26	INTENSIVE CARE UNIT	745	
27	CORONARY CARE UNIT		
28	BURN INTENSIVE CARE UNIT		
29	SURGICAL INTENSIVE CARE U		
31	SUBPROVIDER		
33	NURSERY		
34	SKILLED NURSING FACILITY		
35	NURSING FACILITY		
01	ICF/MR		
101	TOTAL	11,617	



TITLE XVIII, PART A

HOSPITAL

PPS

WKST A LINE NO.	COST CENTER DESCRIPTION	TOTAL COSTS 3	O/P PASS THRU COSTS 3.01	TOTAL CHARGES 4	RATIO OF COST TO CHARGES 5	O/P RATIO OF CST TO CHARGES 5.01	INPAT PROG CHARGE 6	INPAT PROG PASS THRU COST 7
37	ANCILLARY SRVC COST CNTRS							
38	OPERATING ROOM			46,519,917			5,761,285	
39	RECOVERY ROOM			7,393,103			540,541	
40	DELIVERY ROOM & LABOR ROO							
41	ANESTHESIOLOGY							
42	RADIOLOGY-DIAGNOSTIC			66,375,351			6,802,028	
43	RADIOLOGY-THERAPEUTIC			12,150,064			100,929	
44	RADIOISOTOPE							
45	LABORATORY			50,730,859			10,962,639	
46	PBP CLINICAL LAB SERVICES							
47	WHOLE BLOOD & PACKED RED							
48	BLOOD STORING, PROCESSING							
49	INTRAVENOUS THERAPY							
50	RESPIRATORY THERAPY			4,939,263			2,079,340	
51	PHYSICAL THERAPY			5,371,340			931,700	
52	OCCUPATIONAL THERAPY			1,034,569			365,428	
53	SPEECH PATHOLOGY			415,822			119,644	
54	ELECTROCARDIOLOGY			15,002,456			4,024,987	
55	ELECTROENCEPHALOGRAPHY							
55	MEDICAL SUPPLIES CHARGED			2,923,863			725,247	
56	30 IMPL. DEV. CHARGED TO PAT			14,316,614			3,883,828	
57	DRUGS CHARGED TO PATIENTS			28,855,652			8,774,872	
58	RENAL DIALYSIS							
58	ASC (NON-DISTINCT PART)							
59	01 ASC (NON-DISTINCT PART)			6,841,665			1,204,927	
59	CARDIAC CATHETERIZATION L							
60	97 CARDIAC REHABILITATION			303,046			390	
60	OUTPAT SERVICE COST CNTRS							
60	01 CLINIC							
60	02 SLEEP LAB			7,581,638			62,198	
61	EMERGENCY			63,253,616			5,537,193	
62	OBSERVATION BEDS (NON-DIS			1,490,239			103,314	
64	OTHER REIMBURS COST CNTRS							
65	HOME PROGRAM DIALYSIS							
66	AMBULANCE SERVICES							
67	DURABLE MEDICAL EQUIP-REN							
101	DURABLE MEDICAL EQUIP-SOL							
	TOTAL			335,499,077			51,980,490	

TITLE XVIII, PART A HOSPITAL PPS

WKST A LINE NO.	COST CENTER DESCRIPTION	OUTPAT PROG CHARGES 8	OUTPAT PROG D, V COL 5.03 8.01	OUTPAT PROG D, V COL 5.04 8.02	OUTPAT PROG PASS THRU COST 9	COL 8.01 * COL 5 9.01	COL 8.02 * COL 5 9.02
	ANCILLARY SRVC COST CNTRS						
37	OPERATING ROOM	4,238,857					
38	RECOVERY ROOM	808,793					
39	DELIVERY ROOM & LABOR ROO						
40	ANESTHESIOLOGY						
41	RADIOLOGY-DIAGNOSTIC	10,048,869					
42	RADIOLOGY-THERAPEUTIC	3,583,183					
43	RADIOISOTOPE						
44	LABORATORY	688,526					
45	PBP CLINICAL LAB SERVICES						
46	WHOLE BLOOD & PACKED RED						
47	BLOOD STORING, PROCESSING						
48	INTRAVENOUS THERAPY						
49	RESPIRATORY THERAPY	272,995					
50	PHYSICAL THERAPY	2,302					
51	OCCUPATIONAL THERAPY						
52	SPEECH PATHOLOGY	83					
53	ELECTROCARDIOLOGY	2,134,847					
54	ELECTROENCEPHALOGRAPHY						
55	MEDICAL SUPPLIES CHARGED	211,646					
55	30 IMPL. DEV. CHARGED TO PAT	1,151,609					
56	DRUGS CHARGED TO PATIENTS	1,189,240					
57	RENAL DIALYSIS						
58	ASC (NON-DISTINCT PART)						
58	01 ASC (NON-DISTINCT PART)	1,085,928					
59	CARDIAC CATHETERIZATION L						
59	97 CARDIAC REHABILITATION	42,831					
	OUTPAT SERVICE COST CNTRS						
60	CLINIC						
60	01 CLINIC						
60	02 SLEEP LAB	1,260,797					
61	EMERGENCY	6,435,967					
62	OBSERVATION BEDS (NON-DIS	283,941					
	OTHER REIMBURS COST CNTRS						
64	HOME PROGRAM DIALYSIS						
65	AMBULANCE SERVICES						
66	DURABLE MEDICAL EQUIP-REN						
67	DURABLE MEDICAL EQUIP-SOL						
101	TOTAL	33,440,414					









TITLE XVIII, PART B HOSPITAL

PART VI - VACCINE COST APPORTIONMENT

1	DRUGS CHARGED TO PATIENTS-RATIO OF COST TO CHARGES	1	.180529
2	PROGRAM VACCINE CHARGES		27,343
3	PROGRAM COSTS		4,936

















BALANCE SHEET

		GENERAL FUND	SPECIFIC FUND PURPOSE	ENDOWMENT FUND	PLANT FUND
ASSETS		1	2	3	4
CURRENT ASSETS					
1	CASH ON HAND AND IN BANKS	52,847,198			
2	TEMPORARY INVESTMENTS				
3	NOTES RECEIVABLE				
4	ACCOUNTS RECEIVABLE	11,727,443			
5	OTHER RECEIVABLES	211,951			
6	LESS: ALLOWANCE FOR UNCOLLECTIBLE NOTES & ACCOUNTS RECEIVABLE				
7	INVENTORY	1,732,125			
8	PREPAID EXPENSES	551,229			
9	OTHER CURRENT ASSETS				
10	DUE FROM OTHER FUNDS				
11	TOTAL CURRENT ASSETS	67,069,946			
FIXED ASSETS					
12	LAND				
12.01	LAND IMPROVEMENTS	6,313,155			
13	LESS ACCUMULATED DEPRECIATION	-2,144,345			
14	BUILDINGS	74,583,262			
14.01	LESS ACCUMULATED DEPRECIATION	-11,249,433			
15	LEASEHOLD IMPROVEMENTS	23,806,436			
15.01	LESS ACCUMULATED DEPRECIATION	-2,265,720			
16	FIXED EQUIPMENT	12,631,273			
16.01	LESS ACCUMULATED DEPRECIATION	-5,743,715			
17	AUTOMOBILES AND TRUCKS				
17.01	LESS ACCUMULATED DEPRECIATION				
18	MAJOR MOVABLE EQUIPMENT	47,713,751			
18.01	LESS ACCUMULATED DEPRECIATION	-31,720,443			
19	MINOR EQUIPMENT DEPRECIABLE	134,808			
19.01	LESS ACCUMULATED DEPRECIATION	-106,986			
20	MINOR EQUIPMENT-NONDEPRECIABLE				
21	TOTAL FIXED ASSETS	111,952,043			
OTHER ASSETS					
22	INVESTMENTS	2,959,558			
23	DEPOSITS ON LEASES				
24	DUE FROM OWNERS/OFFICERS				
25	OTHER ASSETS	3,057,246			
26	TOTAL OTHER ASSETS	6,016,804			
27	TOTAL ASSETS	185,038,793			

BALANCE SHEET

	GENERAL FUND	SPECIFIC PURPOSE FUND	ENDOWMENT FUND	PLANT FUND
LIABILITIES AND FUND BALANCE	1	2	3	4
CURRENT LIABILITIES				
28 ACCOUNTS PAYABLE	7,099,178			
29 SALARIES, WAGES & FEES PAYABLE	4,723,091			
30 PAYROLL TAXES PAYABLE				
31 NOTES AND LOANS PAYABLE (SHORT TERM)	2,814,010			
32 DEFERRED INCOME				
33 ACCELERATED PAYMENTS				
34 DUE TO OTHER FUNDS	-25,357			
35 OTHER CURRENT LIABILITIES				
36 TOTAL CURRENT LIABILITIES	14,610,922			
LONG TERM LIABILITIES				
37 MORTGAGE PAYABLE				
38 NOTES PAYABLE	157,542,217			
39 UNSECURED LOANS				
40.01 LOANS PRIOR TO 7/1/66				
40.02 ON OR AFTER 7/1/66				
41 OTHER LONG TERM LIABILITIES	4,698,836			
42 TOTAL LONG-TERM LIABILITIES	162,241,053			
43 TOTAL LIABILITIES	176,851,975			
CAPITAL ACCOUNTS				
44 GENERAL FUND BALANCE	8,186,818			
45 SPECIFIC PURPOSE FUND				
46 DONOR CREATED- ENDOWMENT FUND BALANCE- RESTRICTED				
47 DONOR CREATED- ENDOWMENT FUND BALANCE- UNRESTRICT				
48 GOVERNING BODY CREATED- ENDOWMENT FUND BALANCE				
49 PLANT FUND BALANCE-INVESTED IN PLANT				
50 PLANT FUND BALANCE- RESERVE FOR PLANT IMPROVEMENT, REPLACEMENT AND EXPANSION				
51 TOTAL FUND BALANCES	8,186,818			
52 TOTAL LIABILITIES AND FUND BALANCES	185,038,793			

		GENERAL FUND		SPECIFIC PURPOSE FUND	
		1	2	3	4
1	FUND BALANCE AT BEGINNING OF PERIOD		-17,556,890		
2	NET INCOME (LOSS)		25,743,712		
3	TOTAL		8,186,822		
4	ADDITIONS (CREDIT ADJUSTMENTS) (SPECIFY)				
5	ADDITIONS (CREDIT ADJUSTM				
6					
7					
8					
9					
10	TOTAL ADDITIONS				
11	SUBTOTAL		8,186,822		
12	DEDUCTIONS (DEBIT ADJUSTMENTS) (SPECIFY)				
13	DEDUCTIONS (DEBIT ADJUSTM				
14	PLUG \$4 TO ADDRESS VARIAN	4			
15					
16					
17					
18	TOTAL DEDUCTIONS			4	
19	FUND BALANCE AT END OF PERIOD PER BALANCE SHEET		8,186,818		

		ENDOWMENT FUND		PLANT FUND	
		5	6	7	8
1	FUND BALANCE AT BEGINNING OF PERIOD				
2	NET INCOME (LOSS)				
3	TOTAL				
4	ADDITIONS (CREDIT ADJUSTMENTS) (SPECIFY)				
5	ADDITIONS (CREDIT ADJUSTM				
6					
7					
8					
9					
10	TOTAL ADDITIONS				
11	SUBTOTAL				
12	DEDUCTIONS (DEBIT ADJUSTMENTS) (SPECIFY)				
13	DEDUCTIONS (DEBIT ADJUSTM				
14	PLUG \$4 TO ADDRESS VARIAN				
15					
16					
17					
18	TOTAL DEDUCTIONS				
19	FUND BALANCE AT END OF PERIOD PER BALANCE SHEET				



DESCRIPTION

1	TOTAL PATIENT REVENUES	390,759,063
2	LESS: ALLOWANCES AND DISCOUNTS ON PATIENT'S ACCTS	242,020,686
3	NET PATIENT REVENUES	148,738,377
4	LESS: TOTAL OPERATING EXPENSES	132,329,066
5	NET INCOME FROM SERVICE TO PATIENTS	16,409,311
	OTHER INCOME	
6	CONTRIBUTIONS, DONATIONS, BEQUESTS, ETC.	
7	INCOME FROM INVESTMENTS	2,501,663
8	REVENUE FROM TELEPHONE AND TELEGRAPH SERVICE	
9	REVENUE FROM TELEVISION AND RADIO SERVICE	
10	PURCHASE DISCOUNTS	
11	REBATES AND REFUNDS OF EXPENSES	
12	PARKING LOT RECEIPTS	
13	REVENUE FROM LAUNDRY AND LINEN SERVICE	
14	REVENUE FROM MEALS SOLD TO EMPLOYEES AND GUESTS	
15	REVENUE FROM RENTAL OF LIVING QUARTERS	
16	REVENUE FROM SALE OF MEDICAL & SURGICAL SUPPLIES TO OTHER THAN PATIENTS	
17	REVENUE FROM SALE OF DRUGS TO OTHER THAN PATIENTS	
18	REVENUE FROM SALE OF MEDICAL RECORDS & ABSTRACTS	
19	TUITION (FEES, SALE OF TEXTBOOKS, UNIFORMS, ETC)	
20	REVENUE FROM GIFTS, FLOWER, COFFEE SHOP & CANTEEN	
21	RENTAL OF VENDING MACHINES	
22	RENTAL OF HOSPITAL SPACE	
23	GOVERNMENTAL APPROPRIATIONS	
24	INCOME FROM RELATED ENTITIES	6,832,738
25	TOTAL OTHER INCOME	9,334,401
26	TOTAL	25,743,712
	OTHER EXPENSES	
27	OTHER EXPENSES (SPECIFY)	
28		
29		
30	TOTAL OTHER EXPENSES	
31	NET INCOME (OR LOSS) FOR THE PERIOD	25,743,712

CALCULATION OF CAPITAL PAYMENT

PROVIDER NO:	PERIOD:	
15-0158	FROM 1/ 1/2010	
COMPONENT NO:	TO 12/31/2010	
15-0158		

TITLE XVIII, PART A

HOSPITAL

FULLY PROSPECTIVE METHOD

PART I - FULLY PROSPECTIVE METHOD

1	CAPITAL HOSPITAL SPECIFIC RATE PAYMENTS	
	CAPITAL FEDERAL AMOUNT	
2	CAPITAL DRG OTHER THAN OUTLIER	1,275,292
3	CAPITAL DRG OUTLIER PAYMENTS PRIOR TO 10/01/1997	
3 .01	CAPITAL DRG OUTLIER PAYMENTS AFTER 10/01/1997	457,197
	INDIRECT MEDICAL EDUCATION ADJUSTMENT	
4	TOTAL INPATIENT DAYS DIVIDED BY NUMBER OF DAYS	72.28
	IN THE COST REPORTING PERIOD	
4 .01	NUMBER OF INTERNS AND RESIDENTS	.00
	(SEE INSTRUCTIONS)	
4 .02	INDIRECT MEDICAL EDUCATION PERCENTAGE	.00
4 .03	INDIRECT MEDICAL EDUCATION ADJUSTMENT	
	(SEE INSTRUCTIONS)	
5	PERCENTAGE OF SSI RECIPIENT PATIENT DAYS TO	2.38
	MEDICARE PART A PATIENT DAYS	
5 .01	PERCENTAGE OF MEDICAID PATIENT DAYS TO TOTAL	16.04
	DAYS REPORTED ON S-3, PART I	
5 .02	SUM OF 5 AND 5.01	18.42
5 .03	ALLOWABLE DISPROPORTIONATE SHARE PERCENTAGE	3.80
5 .04	DISPROPORTIONATE SHARE ADJUSTMENT	48,461
6	TOTAL PROSPECTIVE CAPITAL PAYMENTS	1,780,950
PART II	- HOLD HARMLESS METHOD	
1	NEW CAPITAL	
2	OLD CAPITAL	
3	TOTAL CAPITAL	
4	RATIO OF NEW CAPITAL TO OLD CAPITAL	.000000
5	TOTAL CAPITAL PAYMENTS UNDER 100% FEDERAL RATE	
6	REDUCTION FACTOR FOR HOLD HARMLESS PAYMENT	
7	REDUCED OLD CAPITAL AMOUNT	
8	HOLD HARMLESS PAYMENT FOR NEW CAPITAL	
9	SUBTOTAL	
10	PAYMENT UNDER HOLD HARMLESS	
PART III	- PAYMENT UNDER REASONABLE COST	
1	PROGRAM INPATIENT ROUTINE CAPITAL COST	
2	PROGRAM INPATIENT ANCILLARY CAPITAL COST	
3	TOTAL INPATIENT PROGRAM CAPITAL COST	
4	CAPITAL COST PAYMENT FACTOR	
5	TOTAL INPATIENT PROGRAM CAPITAL COST	
PART IV	- COMPUTATION OF EXCEPTION PAYMENTS	
1	PROGRAM INPATIENT CAPITAL COSTS	
2	PROGRAM INPATIENT CAPITAL COSTS FOR EXTRAORDINARY	
	CIRCUMSTANCES	
3	NET PROGRAM INPATIENT CAPITAL COSTS	
4	APPLICABLE EXCEPTION PERCENTAGE	.00
5	CAPITAL COST FOR COMPARISON TO PAYMENTS	
6	PERCENTAGE ADJUSTMENT FOR EXTRAORDINARY	.00
	CIRCUMSTANCES	
7	ADJUSTMENT TO CAPITAL MINIMUM PAYMENT LEVEL	
	FOR EXTRAORDINARY CIRCUMSTANCES	
8	CAPITAL MINIMUM PAYMENT LEVEL	
9	CURRENT YEAR CAPITAL PAYMENTS	
10	CURRENT YEAR COMPARISON OF CAPITAL MINIMUM PAYMENT	
	LEVEL TO CAPITAL PAYMENTS	
11	CARRYOVER OF ACCUMULATED CAPITAL MINIMUM PAYMENT	
	LEVEL OVER CAPITAL PAYMENT	
12	NET COMPARISON OF CAPITAL MINIMUM PAYMENT LEVEL	
	TO CAPITAL PAYMENTS	
13	CURRENT YEAR EXCEPTION PAYMENT	
14	CARRYOVER OF ACCUMULATED CAPITAL MINIMUM PAYMENT	
	LEVEL OVER CAPITAL PAYMENT FOR FOLLOWING PERIOD	
15	CUR YEAR ALLOWABLE OPERATING AND CAPITAL PAYMENT	
16	CURRENT YEAR OPERATING AND CAPITAL COSTS	
17	CURRENT YEAR EXCEPTION OFFSET AMOUNT	
	(SEE INSTRUCTIONS)	