2011 Hospital Financial Survey Hospital Financial Statements Reconciliation Addendum UID: HOSP345- Monroe County Hospital

| Section 1: Hospital Only Data from Hospital Financial Survey (HFS): |  |  |  |  |  |  |  |  |  |  |  |
| :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: | :---: |
| HFS Source: | Part C, 1 | Contractual Adj's, Hill Burton, Bad Debt, Gross Indigent and Charity Care, and Other Free Care |  |  |  |  |  |  |  |  |  |
|  |  | Part C, 1 | Part C, 1 | Part C, 1 | Part C, 1 | Part C, 1 | Part E, 1 | Part E, 1 | Part C, 1 | Total Deductions of All Types (Sum Col 2-9) | Net PatientRevenue (Col1-10) |
|  | Gross Patient Charges | Medicare Contractual Adjs | Medicaid Contractual Adjs | Other Contractual Adjs | Hill Burton Obligations | Bad Debt | Gross Indigent Care (IP \& OP) | Gross Charity Care (IP \& OP) | Other Free Care |  |  |
|  | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| Inpatient Gross Patient Revenue | 3,778,944 |  |  |  |  |  |  |  |  |  |  |
| Outpatient Gross Patient Revenue | 15,043,470 |  |  |  |  |  |  |  |  |  |  |
| Per Part C, 1. Financial Table |  | 3,346,008 | 1,357,616 | 2,212,516 | 0 | 2,315,852 |  |  | 889 |  |  |
| Per Part E, 1. Indigent and Charity Care |  |  |  |  |  |  | 1,283,999 | 261,750 |  |  |  |
| Totals per HFS | 18,822,414 | 3,346,008 | 1,357,616 | 2,212,516 | 0 | 2,315,852 | 1,283,999 | 261,750 | 889 | 10,778,630 | 8,043,784 |
| Section 2: Reconciling Items to Financial Statements: |  |  |  |  |  |  |  |  | (B) |  | (B) |
| Non-Hospital Services: |  |  |  |  |  |  |  |  |  |  |  |
| > Professional Fees | 0 |  |  |  |  |  |  |  |  | 0 |  |
| > Home Health Agency | 0 |  |  |  |  |  |  |  |  | 0 |  |
| > SNF/NF Swing Bed Services | 0 |  |  |  |  |  |  |  |  | 0 |  |
| > Nursing Home | 0 |  |  |  |  |  |  |  |  | 0 |  |
| > Hospice | 0 |  |  |  |  |  |  |  |  | 0 |  |
| > Freestanding Ambulatory Surg. Centers | 0 |  |  |  |  |  |  |  |  | 0 |  |
| > N/A | 0 |  |  |  |  |  |  |  |  | 0 |  |
| $>$ N/A | 0 |  |  |  |  |  |  |  |  | 0 |  |
| $>$ N/A | 0 |  |  |  |  |  |  |  |  | 0 |  |
| $>$ N/A | 0 |  |  |  |  |  |  |  |  | 0 |  |
| $>$ N/A | 0 |  |  |  |  |  |  |  |  | 0 |  |
| > N/A | 0 |  |  |  |  |  |  |  |  | 0 |  |
| Bad Debt (Expense per Financials) (A) |  |  |  |  |  |  |  |  |  | 0 |  |
| Indigent Care Trust Fund Income |  |  |  |  |  |  |  |  |  | $(514,440)$ |  |
| Other Reconciling Items: |  |  |  |  |  |  |  |  |  |  |  |
| > N/A | 0 |  |  |  |  |  |  |  |  | 0 |  |
| $>$ N/A | 0 |  |  |  |  |  |  |  |  | 0 |  |
| $>$ N/A | 0 |  |  |  |  |  |  |  |  | 0 |  |
| $>$ N/A | 0 |  |  |  |  |  |  |  |  | 0 |  |
| Total Reconciling Items | 0 |  |  |  |  |  |  |  |  | $(514,440)$ | 514,440 |
|  |  |  |  |  |  |  |  |  |  |  |  |
| Total Per Form | 18,822,414 |  |  |  |  |  |  |  |  | 10,264,190 | 8,558,224 |
| Total Per Financial Statements | 0 |  |  |  |  |  |  |  |  |  | 0 |
| Unreconciled Difference (Must be Zero) | 18,822,414 |  |  |  |  |  |  |  |  |  | 8,558,224 |

(A) Due to specific differences in the presentation of data on the HFS, Bad Debt per Financials may differ from the amount reported on the HFS-proper (Part C).
(B) Taxable Net Patient Revenue will equal Net Patient Revenue in Section 1 column 11, plus Other Free Care in Section 1 column 9.

