

**2009 Hospital Financial Survey Hospital Financial Statements Reconciliation Addendum**  
**UID: HOSP612- Children's Healthcare of Atlanta at Hughes Spalding**

| Section 1: Hospital Only Data from Hospital Financial Survey (HFS):   |                       |                           |                           |                        |                         |           |                               |                              |                 |   |                                  |
|---|-----------------------|---------------------------|---------------------------|------------------------|-------------------------|-----------|-------------------------------|------------------------------|-----------------|---|----------------------------------|
| HFS Source:   | Part C, 1             | Part C, 1                 | Part C, 1                 | Part C, 1              | Part C, 1               | Part C, 1 | Part E, 1                     | Part E, 1                    | Part C, 1       |   |                                  |
|   | 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 | Total Deductions of All Types (Sum Col 2-9) | Net Patient Revenue (Col 1 - 10) |
|   | 1                     | 2                         | 3                         | 4                      | 5                       | 6         | 7                             | 8                            | 9               | 10  | 11                               |
| Inpatient Gross Patient Revenue   | 9,173,213             |                           |                           |                        |                         |           |                               |                              |                 |   |                                  |
| Outpatient Gross Patient Revenue  | 39,731,692            |                           |                           |                        |                         |           |                               |                              |                 |   |                                  |
| Per Part C, 1. Financial Table  |                       | 0                         | 25,964,366                | 2,106,781              | 0                       | 43,488    |                               |                              | 0               |   |                                  |
| Per Part E, 1. Indigent and Charity Care  |                       |                           |                           |                        |                         |           | 4,162,234                     | 763,575                      |                 |   |                                  |
| Totals per HFS  | 48,904,905            | 0                         | 25,964,366                | 2,106,781              | 0                       | 43,488    | 4,162,234                     | 763,575                      | 0               | 33,040,444                                  | 15,864,461                       |
| Section 2: Reconciling Items to Financial Statements:   |                       |                           |                           |                        |                         |           |                               |                              |                 | (B)   | (B)                              |
| Non-Hospital Services:  |                       |                           |                           |                        |                         |           |                               |                              |                 |   |                                  |
| > Professional Fees   | 585,480               |                           |                           |                        |                         |           |                               |                              |                 | 292,741                                     |                                  |
| > 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   |                       |                           |                           |                        |                         |           |                               |                              |                 | 0   |                                  |
| Other Reconciling Items:  |                       |                           |                           |                        |                         |           |                               |                              |                 |   |                                  |
| > N/A   | 0                     |                           |                           |                        |                         |           |                               |                              |                 | 0   |                                  |
| > N/A   | 0                     |                           |                           |                        |                         |           |                               |                              |                 | 0   |                                  |
| > N/A   | 0                     |                           |                           |                        |                         |           |                               |                              |                 | 0   |                                  |
| > N/A   | 0                     |                           |                           |                        |                         |           |                               |                              |                 | 0   |                                  |
| Total Reconciling Items   | 585,480               |                           |                           |                        |                         |           |                               |                              |                 | 292,741                                     | 292,739                          |
| Total Per Form  | 49,490,385            |                           |                           |                        |                         |           |                               |                              |                 | 33,333,185                                  | 16,157,200                       |
| Total Per Financial Statements  | 49,490,385            |                           |                           |                        |                         |           |                               |                              |                 |   | 16,157,200                       |
| Unreconciled Difference (Must be Zero)  | 0                     |                           |                           |                        |                         |           |                               |                              |                 |   | 0                                |
| (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.                              |                       |                           |                           |                        |                         |           |                               |                              |                 |   |                                  |