

2010 Hospital Financial Survey Hospital Financial Statements Reconciliation Addendum
UID: HOSP913- Lighthouse Care Center of Augusta

| Section 1: Hospital Only Data from Hospital Financial Survey (HFS): | | | | | | | | | | | |
|---------------------------------------------------------------------|------------------------------------------------------------------------------------------------|---------------------------|---------------------------|------------------------|-------------------------|-----------|-------------------------------|------------------------------|-----------------|---------------------------------------------|----------------------------------|
| HFS Source: | Contractual Adj's, Hill Burton, Bad Debt, Gross Indigent and Charity Care, and Other Free Care | | | | | | | | | Total Deductions of All Types (Sum Col 2-9) | Net Patient Revenue (Col 1 - 10) |
| | 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 | | |
| | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | 11 |
| Inpatient Gross Patient Revenue | | | | | | | | | | | |
| Outpatient Gross Patient Revenue | | | | | | | | | | | |
| Per Part C, 1. Financial Table | | | | | | | | | | | |
| Per Part E, 1. Indigent and Charity Care | | | | | | | | | | | |
| Totals per HFS | 0 | | | | | | | | | 0 | 0 |
| Section 2: Reconciling Items to Financial Statements: | | | | | | | | | (B) | | (B) |
| Non-Hospital Services: | | | | | | | | | | | |
| > Professional Fees | | | | | | | | | | | |
| > Home Health Agency | | | | | | | | | | | |
| > SNF/NF Swing Bed Services | | | | | | | | | | | |
| > Nursing Home | | | | | | | | | | | |
| > Hospice | | | | | | | | | | | |
| > Freestanding Ambulatory Surg. Centers | | | | | | | | | | | |
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| Bad Debt (Expense per Financials) (A) | | | | | | | | | | | |
| Indigent Care Trust Fund Income | | | | | | | | | | | |
| Other Reconciling Items: | | | | | | | | | | | |
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| Total Reconciling Items | 0 | | | | | | | | | 0 | 0 |
| Total Per Form | 0 | | | | | | | | | 0 | 0 |
| Total Per Financial Statements | | | | | | | | | | | |
| 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.