

**SHORE EMERGENCY CENTER AT QUEENSTOWN**

**HEALTH SERVICES COST REVIEW  
COMMISSION**

**RATE REVIEW SYSTEM**

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

INPATIENTS AND PATIENT DAYS

V1

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER: 210088

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

OUTPATIENT VISITS

V2

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

|                    |        |                         | COL. 1           | COL. 2            | COL. 3        | COL. 4         | COL. 5          | COL. 6        |
|--------------------|--------|-------------------------|------------------|-------------------|---------------|----------------|-----------------|---------------|
| REPORTING SCHEDULE |        | CENTER                  | INPATIENT VISITS | OUTPATIENT VISITS | TOTAL VISITS  | INPATIENT RVUS | OUTPATIENT RVUS | TOTAL RVUS    |
|                    |        |                         | RECORDS          | RECORDS           | COL 1 + COL 2 | RECORDS        | RECORDS         | COL 4 + COL 5 |
| D18                | EMG    | Emergency Services      | 0                | 0                 | 0             | 0              | 0               | 0             |
| D19                | CL     | Clinical Services       | 0                | 0                 | 0             | 0              | 0               | 0             |
| D20                | PDC    | Psych. Day & Night Care | 0                | 0                 | 0             |                |                 |               |
| D22                | SDS    | Same Day Surgery        | 0                | 0                 | 0             |                |                 |               |
| D50                | FSE    | Free Standing Emergency | 0                | 27,716            | 27,716        |                |                 |               |
| D55                | OBV    | Observation             | 0                | 0                 | 0             | 0              | 0               | 0             |
| D58                | OCL    | Oncology O/P Clinic     | 0                | 0                 | 0             | 0              | 0               | 0             |
| D83                | CL-340 | 340B Clinic Services    |                  |                   |               | 0              | 0               | 0             |
|                    |        |                         |                  |                   |               |                |                 |               |
|                    |        |                         |                  |                   |               |                |                 |               |
|                    | TOTAL  |                         | 0                | 27,716            | 27,716        | 0              | 0               | 0             |

ANCILLARY SERVICE UNITS

V3

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

|                    |         | COL. 1                                    | COL. 2             | COL. 3           | COL. 4            |              |
|--------------------|---------|---|--------------------|------------------|-------------------|--------------|
| REPORTING SCHEDULE |         | CENTER                                    | UNIT OF MEASURE    | INPATIENT VOLUME | OUTPATIENT VOLUME | TOTAL VOLUME |
|                    |         |   | RECORDS            | RECORDS          | COL 1 + COL 2     |              |
| D23                | DEL     | Labor & Delivery Services                 | MD RVUs            | 0                | 0                 | 0            |
| D24                | OR      | Operating Room                            | Minutes            | 0                | 0                 | 0            |
| D24A               | ORC     | Operating Room Clinic                     | Minutes            | 0                | 0                 | 0            |
| D25                | ANS     | Anesthesiology                            | Minutes            | 0                | 0                 | 0            |
| D28                | LAB     | Laboratory Services                       | MD RVUs            | 0                | 378,657           | 378,657      |
| D30                | EKG     | Electrocardiography                       | 1974 California RV | 0                | 7,752             | 7,752        |
| D31                | IRC     | Interventional Radiology / Cardiovascular | MD RVUs            | 0                | 0                 | 0            |
| D32                | RAD     | Radiology-Diagnostic                      | HSCRC RVUs         | 0                | 35,302            | 35,302       |
| D33                | CAT     | CT Scanner                                | HSCRC RVUs         | 0                | 123,984           | 123,984      |
| D34                | RAT     | Radiology-Therapeutic                     | MD RVUs            | 0                | 0                 | 0            |
| D35                | NUC     | Nuclear Medicine                          | HSCRC RVUs         | 0                | 0                 | 0            |
| D36                | RES     | Respiratory Therapy                       | MD RVUs            | 0                | 0                 | 0            |
| D37                | PUL     | Pulmonary Function Testing                | MD RVUs            | 0                | 0                 | 0            |
| D38                | EEG     | Electroencephalography                    | 1974 California RV | 0                | 0                 | 0            |
| D39                | PTH     | Physical Therapy                          | MD RVUs            | 0                | 0                 | 0            |
| D40                | OTH     | Occupational Therapy                      | MD RVUs            | 0                | 0                 | 0            |
| D41                | STH     | Speech Language Pathology                 | MD RVUs            | 0                | 0                 | 0            |
| D42                | REC     | Recreational Therapy                      | Treatments         | 0                | 0                 | 0            |
| D43                | AUD     | Audiology                                 | MD RVUs            | 0                | 0                 | 0            |
| D44                | OPM     | Other Physical Medicine                   | Treatments         | 0                | 0                 | 0            |
| D45                | RDL     | Renal Dialysis                            | Treatments         | 0                | 0                 | 0            |
| D46                | OA      | Organ Acquisition                         | Treatments         | 0                | 0                 | 0            |
| D48                | LEU     | Leukopheresis                             | JHU RVUs           | 0                | 0                 | 0            |
| D49                | HYP     | Hyperbaric Chamber                        | Hours of Treatment | 0                | 0                 | 0            |
| D51                | MRI     | Magnetic Resonance Imaging                | HSCRC RVUs         | 0                | 0                 | 0            |
| D53                | LIT     | Lithotripsy                               | # of Procedures    | 0                | 0                 | 0            |
| D56                | AMR     | Ambulance Services-Rebundled              | HSCRC RVUs         | 0                | 0                 | 0            |
| D77                | PST     | Psychological Testing                     | Hours              | 0                | 0                 | 0            |
| D80                | ETH     | Electroconvulsive Therapy                 | Treatments         | 0                | 0                 | 0            |
| D84                | RAT-340 | 340B Radiology - Therapeutic              | MD RVUs            | 0                | 0                 | 0            |
| D85                | ORC-340 | 340B OR Clinic Services                   | Minutes            | 0                | 0                 | 0            |
| D86                | LAB-340 | 340B Laboratory Services                  | MD RVUs            | 0                | 0                 | 0            |
| D87                | CDS-340 | 340B Drugs                                | EIPA               | 0                | 0                 | 0            |
|                    |         |   |                    |                  |                   |              |

**EQUIVALENT INPATIENT DAYS AND ADMISSIONS**

**V5**

INSTITUTION NAME: Shore Emergency Center at Queenstown FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

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

INPATIENT DATA - BASE YEAR

COL. 1

COL. 2

|   |   |                 |         |   |
|---|---|-----------------|---------|---|
| A | GROSS INPATIENT REVENUE                         | RECORDS, BUDGET | 0.0     | A |
| B | INPATIENT GRANT REVENUE                         | RECORDS, BUDGET | 0.0     | B |
| C | TOTAL INPATIENT REVENUE *                       | A + B           | 0.0     | C |
| D | TOTAL INPATIENT DAYS (IPDs) (EXCLUDING NURSERY) | SCHD V 1 D      | 0       | D |
| E | INPATIENT UNIT REVENUE                          | C / D           | 0.00000 | E |
| F | GROSS OUTPATIENT REVENUE                        | RECORDS, BUDGET | 7,034.9 | F |
| G | OUTPATIENT GRANT REVENUE                        | RECORDS, BUDGET | 0.0     | G |
| H | TOTAL OUTPATIENT REVENUE *                      | F + G           | 7,034.9 | H |
| I | TOTAL OUTPATIENT VISITS                         | SCH V 2 B       | 0       | I |
| J | OUTPATIENT UNIT REVENUE                         | H / I           | 0.00000 | J |
| K | INPATIENT - OUTPATIENT UNIT REVENUE RATIO       | E / J           | 0.00000 | K |
| L | INPATIENT EQUIVALENT OF OUTPATIENT VISITS       | I / K           | 0       | L |
| M | EQUIVALENT INPATIENT DAYS (EIPDs)               | D + L           | 0       | M |

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

|   |   |           |         |   |
|---|---|-----------|---------|---|
| N | TOTAL INPATIENT ADMISSIONS                | SCH V 1 D | 0       | N |
| O | INPATIENT UNIT REVENUE                    | C / N     | 0.00000 | O |
| P | OUTPATIENT UNIT REVENUE                   | H / I     | 0.00000 | P |
| Q | INPATIENT - OUTPATIENT UNIT REVENUE RATIO | O / P     | 0.00000 | Q |
| R | INPATIENT EQUIVALENT OF OUTPATIENT VISITS | I / Q     | 0       | R |
| S | EQUIVALENT INPATIENT ADMISSIONS (EIPAs)   | N + R     | 0       | U |

**UNASSIGNED EXPENSES**

**UA**

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

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

**FISCAL YEAR DATA**

**MAL                  OIN                  MCR                  DEP                  LEA                  LIC                  IST                  ILT**

|   |   |         |      |        |     |        |       |     |     |     |       |       |   |
|---|---|---------|------|--------|-----|--------|-------|-----|-----|-----|-------|-------|---|
| A | BASE YEAR EXPENSES                                | RECORDS | 23.5 | (93.3) | 0.0 | (69.8) | 468.1 | 0.9 | 0.4 | 0.0 | 120.4 | 520.0 | A |
| B | ALLOC. TO AUX. ENTERPRISES & UNREGULATED SERVICES | RECORDS | 0.0  | 0.0    | 0.0 | 0.0    | 0.0   | 0.0 | 0.0 | 0.0 | 0.0   | 0.0   | B |
| C | FISCAL YEAR EXP. - ADJUSTED                       | A + B   | 23.5 | (93.3) | 0.0 | (69.8) | 468.1 | 0.9 | 0.4 | 0.0 | 120.4 | 520.0 | C |

HOSPITAL BASED PHYSICIANS

P1 A

INSTITUTION NAME: Shore Emergency Center at Queenstown FISCAL YEAR 6/30/2018  
 INSTITUTION NUMBER: 210088

|             |   | COL 1    | COL 2                  | COL 3               | COL 4                        | COL 5           | COL 6     | COL 7 |      |     |
|-------------|---|----------|------------------------|---------------------|------------------------------|-----------------|-----------|-------|------|-----|
| COST CENTER | CODE                                      | Research | Chief of Medical Staff | Medical Care Review | Administration & Supervision | Part B Services | EDUCATION | TOTAL |      |     |
| A1          | Medical Staff Administration              | MSA      | 0.0                    | 47.5                | 0.0                          | 0.0             | 0.0       | 0.0   | 47.5 | A1  |
| A2          | Med/Surg Acute                            | MSG      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A2  |
| A3          | Pediatric Acute                           | PED      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A3  |
| A4          | Psychiatric Acute                         | PSY      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A4  |
| A5          | Obstetrics Acute                          | OBS      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A5  |
| A6          | Definitive Observation                    | DEF      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A6  |
| A7          | Med/Surg Intensive Care                   | MIS      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A7  |
| A8          | Coronary Care                             | CCU      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A8  |
| A9          | Pediatric Intensive Care                  | PIC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A9  |
| A10         | Neonatal Intensive Care                   | NEO      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A10 |
| A11         | Burn Care                                 | BUR      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A11 |
| A12         | Psychiatric Intensive Care                | PSI      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A12 |
| A13         | Shock Trauma                              | TRM      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A13 |
| A14         | Oncology                                  | ONC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A14 |
| A15         | Newborn Nursery                           | NUR      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A15 |
| A16         | Premature Nursery                         | PRE      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A16 |
| A17         | Chronic Care                              | CRH      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A17 |
| A18         | Emergency Services                        | EMG      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A18 |
| A19         | Clinical Services                         | CL       | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A19 |
| A20         | Psych. Day & Night Care                   | PDC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A20 |
| A21         | Ambulatory Surgery (PBP)                  | AMS      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A21 |
| A22         | Same Day Surgery                          | SDS      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A22 |
| A23         | Labor & Delivery Services                 | DEL      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A23 |
| A24         | Operating Room                            | OR       | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A24 |
| A25         | Operating Room Clinic                     | ORC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A25 |
| A26         | Anesthesiology                            | ANS      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A26 |
| A27         | Laboratory Services                       | LAB      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A27 |
| A28         | Electrocardiography                       | EKG      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A28 |
| A29         | Interventional Radiology / Cardiovascular | IRC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A29 |
| A30         | Radiology-Diagnostic                      | RAD      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A30 |
| A31         | CT Scanner                                | CAT      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A31 |
| A32         | Radiology-Therapeutic                     | RAT      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A32 |
| A33         | Nuclear Medicine                          | NUC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A33 |
| A34         | Respiratory Therapy                       | RES      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0   | 0.0  | A34 |

HOSPITAL BASED PHYSICIANS

P1 B

INSTITUTION NAME: Shore Emergency Center at Queenstown FISCAL YEAR 6/30/2018  
 INSTITUTION NUMBER: 210088

|             |                                       | COL 1    | COL 2                  | COL 3               | COL 4                        | COL 5           | COL 6     | COL 7   |     |
|-------------|---------------------------------------|----------|------------------------|---------------------|------------------------------|-----------------|-----------|---------|-----|
| COST CENTER | CODE                                  | Research | Chief of Medical Staff | Medical Care Review | Administration & Supervision | Part B Services | EDUCATION | TOTAL   |     |
| A35         | Pulmonary Function Testing            | PUL      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A35 |
| A36         | Electroencephalography                | EEG      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A36 |
| A37         | Physical Therapy                      | PTH      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A37 |
| A38         | Occupational Therapy                  | OTH      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A38 |
| A39         | Speech Language Pathology             | STH      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A39 |
| A40         | Recreational Therapy                  | REC      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A40 |
| A41         | Audiology                             | AUD      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A41 |
| A42         | Other Physical Medicine               | OPM      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A42 |
| A43         | Renal Dialysis                        | RDL      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A43 |
| A44         | Organ Acquisition                     | OA       | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A44 |
| A45         | Ambulatory Surgery                    | AOR      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A45 |
| A46         | Leukopheresis                         | LEU      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A46 |
| A47         | Hyperbaric Chamber                    | HYP      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A47 |
| A48         | Free Standing Emergency               | FSE      | 0.0                    | 0.0                 | 0.0                          | 1,393.8         | 0.0       | 1,393.8 | A48 |
| A49         | Magnetic Resonance Imaging            | MRI      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A49 |
| A50         | Adolescent Dual Diagnosed             | ADD      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A50 |
| A51         | Lithotripsy                           | LIT      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A51 |
| A52         | Rehabilitation                        | RHB      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A52 |
| A53         | Observation                           | OBV      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A53 |
| A54         | Transurethral Microwave Thermotherapy | TMT      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A54 |
| A55         | Oncology O/P Clinic                   | OCL      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A55 |
| A56         | Transurethral Needle Ablation         | TNA      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A56 |
| A57         | Psychiatric Adult                     | PAD      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A57 |
| A58         | Psychiatric Child/Adolescent          | PCD      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A58 |
| A59         | Psychiatric Geriatric                 | PSG      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A59 |
| A60         | Individual Therapies                  | ITH      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A60 |
| A61         | Group Therapies                       | GTH      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A61 |
| A62         | Family Therapies                      | FTH      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A62 |
| A63         | Psychological Testing                 | PST      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A63 |
| A64         | Education                             | PSE      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A64 |
| A65         | Other Therapies                       | OPT      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A65 |
| A66         | Electroconvulsive Therapy             | ETH      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A66 |
| A67         | Activity Therapies                    | ATH      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A67 |
| A68         | Pediatric Step-Down                   | PSD      | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A68 |
| A69         | 340B Clinic Services                  | CL-340   | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A69 |
| A70         | 340B Radiology - Therapeutic          | RAT-340  | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A70 |
| A71         | 340B OR Clinic Services               | ORC-340  | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A71 |
| A72         | 340B Laboratory Services              | LAB-340  | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A72 |
| A73         | 340B Drugs                            | CDS-340  | 0.0                    | 0.0                 | 0.0                          | 0.0             | 0.0       | 0.0     | A73 |
| A74         | Post Graduate Medical Ed              | PME      |                        |                     |                              |                 |           | 0.0     | A74 |

|   |        |          |     |      |     |         |     |     |         |   |
|---|--------|----------|-----|------|-----|---------|-----|-----|---------|---|
| B | TOTALS | //////// | 0.0 | 47.5 | 0.0 | 1,393.8 | 0.0 | 0.0 | 1,441.3 | B |
|---|--------|----------|-----|------|-----|---------|-----|-----|---------|---|

Reporting Schedule

|   |                      |      |     |      |    |          |           |           |      |   |
|---|----------------------|------|-----|------|----|----------|-----------|-----------|------|---|
| C | Cost Center Schedule | //// | F01 | C 13 | UA | D1 - D80 | P2A - P2G | P4A - P4G | //// | C |
|---|----------------------|------|-----|------|----|----------|-----------|-----------|------|---|









**AUXILIARY ENTERPRISES**

Not Applicable

**OTHER INSTITUTIONAL PROGRAMS**

RNS

**F02**

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

|   | VOLUME DATA   | FISCAL YEAR UNITS |
|---|---------------|-------------------|
| A | # of Students | 0                 |

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

**Nursing Education**

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

**FISCAL YEAR DATA**

|     |  |             |       |       |       |         |     |
|-----|--|-------------|-------|-------|-------|---------|-----|
| B   | FISCAL YEAR EXPENSES                     | RECORDS     | 16.3  | 0.0   | 16.3  | XXXXX   | B   |
| C   | ALLOCATION FROM CAFETERIA, PARKING, ETC. | SCH OA      | 0.0   | XXXX  | 0.0   | XXXXX   | C   |
| D   | ALLOCATION FROM GENERAL SERVICE CENTER   | ////        | XXXXX | XXXX  | XXXXX | XXXXX   | D   |
| /// | COL. 5 COST CENTER                       | COL. 6 CODE | ////  | XXXXX | XXXX  | XXXXX   |     |
| D01 |  |             |       |       | 0.0   | XXXXX   | D01 |
| D02 |  |             |       |       | 0.0   | XXXXX   | D02 |
| D03 |  |             |       |       | 0.0   | XXXXX   | D03 |
| D04 |  |             |       |       | 0.0   | XXXXX   | D04 |
| D05 |  |             |       |       | 0.0   | XXXXX   | D05 |
| D06 |  |             |       |       | 0.0   | XXXXX   | D06 |
| D07 |  |             |       |       | 0.0   | XXXXX   | D07 |
| D08 |  |             |       |       | 0.0   | XXXXX   | D08 |
| D09 |  |             |       |       | 0.0   | XXXXX   | D09 |
| D10 |  |             |       |       | 0.0   | XXXXX   | D10 |
| D11 |  |             |       |       | 0.0   | XXXXX   | D11 |
| D12 |  |             |       |       | 0.0   | XXXXX   | D12 |
| D13 |  |             |       |       | 0.0   | XXXXX   | D13 |
| D14 |  |             |       |       | 0.0   | XXXXX   | D14 |
| E   | CAPITAL FACILITIES ALLOWANCE             | SCH H3      |       | 0.0   | 0.0   | XXXXX   | E   |
| F   | FISCAL YEAR ADJUSTED EXPENSES            | B+C+D       | 16.3  | 0.0   | 16.3  | #DIV/0! | F   |

**FISCAL YEAR PROFIT (LOSS)**

|   |                     |         |       |       |        |       |   |
|---|---------------------|---------|-------|-------|--------|-------|---|
| G | FISCAL YEAR REVENUE | RECORDS | XXXXX | XXXXX | 0.0    | XXXXX | G |
| H | PROFIT (LOSS)       | F - E   | XXXXX | XXXXX | (16.3) | XXXXX | H |

**FTE DATA**

|   |                               |         |     |  |  |  |   |
|---|-------------------------------|---------|-----|--|--|--|---|
| I | FISCAL YEAR HOURS WORKED/2080 | RECORDS | 0.2 |  |  |  | I |
|---|-------------------------------|---------|-----|--|--|--|---|

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: Shore Emergency Center at Queenstown  
 INSTITUTION NUMBER: 210088  
 FISCAL YEAR: 6/30/2018

Allocation of Cafeteria / Parking Expense

|    |                                       | COL. 1            | COL. 2         |
|----|---------------------------------------|-------------------|----------------|
|    |                                       | SOURCE            | TOTAL EXPENSES |
| A  | GAIN (LOSS) TO BE ALLOCATED AS FRINGE | SCH. E2,E7,E8, E9 | 0.0            |
| B  | NUMBER OF FTE'S                       | RECORDS           | 45.7           |
| B1 | LOSS PER FTE                          | A / B             | 0.00000        |

Allocation of Data Processing

|     |                                | COL. 1  | COL. 2                      | COL. 3         | COL. 4         |
|-----|--------------------------------|---------|-----------------------------|----------------|----------------|
|     |                                | SOURCE  | WAGES, SALARIES, & BENEFITS | OTHER EXPENSES | TOTAL EXPENSES |
| C01 | FISCAL YEAR EXPENSES           | RECORDS | 0.0                         | 286.8          | 286.8          |
| 2   | DONATED SERVICES & COMMODITIES | RECORDS | 0.0                         | 0.0            | 0.0            |
| 3   | FISCAL YEAR ADJUSTED EXPENSES  | C1 + C2 | 0.0                         | 286.8          | 286.8          |

|     |                              |         |       |      | CAFETERIA, PARKING, ETC |        |                 |        |                               |                |               |                         | DATA PROCESSING |  |  |  |
|-----|------------------------------|---------|-------|------|-------------------------|--------|-----------------|--------|-------------------------------|----------------|---------------|-------------------------|-----------------|--|--|--|
|     |                              |         |       |      | COL. 1                  | COL. 2 | COL. 3          | COL. 4 | COL. 5                        | COL. 6         | COL. 7        | COL. 8                  |                 |  |  |  |
| /// | DISTRIBUTION OF LOSS PER FTE | LOOK UP | SCHED | CODE | NO. OF FTE'S            | C x D1 | FTE'S ALLOCATED | BASIS  | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |                 |  |  |  |
| 1   | DIETARY SERVICES             | C01     | C01   | DTY  | 0.0                     | \$ -   | 0.0             | 0.00%  | \$ -                          | \$ -           | \$ -          | -                       | -               |  |  |  |
| 2   | LAUNDRY & LINEN              | C02     | C02   | LL   | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 3   | SOCIAL SERVICES              | C03     | C03   | SSS  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 4   | PURCHASING & STORES          | C04     | C04   | PUR  | 0.3                     | 0.0    | 0.0             | 0.33%  | -                             | 0.9            | 0.9           | 0.9                     | 0.9             |  |  |  |
| 5   | PLANT OPERATIONS             | C05     | C05   | POP  | 3.9                     | 0.0    | 0.0             | 6.02%  | -                             | 17.3           | 17.3          | 17.3                    | 17.3            |  |  |  |
| 6   | HOUSEKEEPING                 | C06     | C06   | HKP  | 1.8                     | 0.0    | 0.0             | 3.20%  | -                             | 9.2            | 9.2           | 9.2                     | 9.2             |  |  |  |
| 7   | CENTRAL SERVICES & SUPPLY    | C07     | C07   | CSS  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 8   | PHARMACY                     | C08     | C08   | PHM  | 0.3                     | 0.0    | 0.0             | 1.05%  | -                             | 3.0            | 3.0           | 3.0                     | 3.0             |  |  |  |
| 9   | GENERAL ACCOUNTING           | C09     | C09   | FIS  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 10  | PATIENT ACCOUNTS             | C10     | C10   | PAC  | 3.3                     | 0.0    | 0.0             | 4.62%  | -                             | 13.3           | 13.3          | 13.3                    | 13.3            |  |  |  |
| 11  | HOSPITAL ADMINISTRATION      | C11     | C11   | MGT  | 1.0                     | 0.0    | 0.0             | 6.72%  | -                             | 19.3           | 19.3          | 19.3                    | 19.3            |  |  |  |
| 12  | MEDICAL RECORDS              | C12     | C12   | MRD  | 0.5                     | 0.0    | 0.0             | 0.77%  | -                             | 2.2            | 2.2           | 2.2                     | 2.2             |  |  |  |
| 13  | MEDICAL STAFF ADMINISTRATION | C13     | C13   | MSA  | 0.4                     | 0.0    | 0.0             | 0.25%  | -                             | 0.7            | 0.7           | 0.7                     | 0.7             |  |  |  |
| 14  | NURSING ADMINISTRATION       | C14     | C14   | NAD  | 0.3                     | 0.0    | 0.0             | 0.75%  | -                             | 2.1            | 2.1           | 2.1                     | 2.1             |  |  |  |
| 15  | ORGAN ACQUISITION OVERHEAD   | C15     | C15   | OAO  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 16  | MED/SURG ACUTE               | D01     | D01   | MSG  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 17  | PEDIATRIC ACUTE              | D02     | D02   | PED  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 18  | PSYCHIATRIC ACUTE            | D03     | D03   | PSY  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 19  | OBSTETRICS ACUTE             | D04     | D04   | OBS  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 20  | DEFINITIVE OBSERVATION       | D05     | D05   | DEF  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 21  | MED/SURG INTENSIVE CARE      | D06     | D06   | MIS  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 22  | CORONARY CARE                | D07     | D07   | CCU  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 23  | PEDIATRIC INTENSIVE CARE     | D08     | D08   | PIC  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 24  | NEONATAL INTENSIVE CARE      | D09     | D09   | NEO  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 25  | BURN CARE                    | D10     | D10   | BUR  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 26  | PSYCHIATRIC INTENSIVE CARE   | D11     | D11   | PSI  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 27  | SHOCK TRAUMA                 | D12     | D12   | TRM  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 28  | ONCOLOGY                     | D13     | D13   | ONC  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |
| 29  | NEWBORN NURSERY              | D14     | D14   | NUR  | 0.0                     | 0.0    | 0.0             | 0.00%  | -                             | -              | -             | -                       | -               |  |  |  |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

OADP B

INSTITUTION NAME: Shore Emergency Center at Queenstown  
 INSTITUTION NUMBER: 210088  
 FISCAL YEAR: 6/30/2018

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

| /// | DISTRIBUTION OF LOSS PER FTE              | LOOK UP | SCHED | CODE | NO. OF FTE'S | C x DI | FTE'S ALLOCATED | BASIS  | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|---|---------|-------|------|--------------|--------|-----------------|--------|-------------------------------|----------------|---------------|-------------------------|
| 30  | PREMATURE NURSERY                         | D15     | D15   | PRE  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 31  | CHRONIC CARE                              | D17     | D17   | CRH  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 32  | EMERGENCY SERVICES                        | D18     | D18   | EMG  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 33  | CLINICAL SERVICES                         | D19     | D19   | CL   | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 34  | PSYCH. DAY & NIGHT CARE                   | D20     | D20   | PDC  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 35  | AMBULATORY SURGERY (PBP)                  | D21     | D21   | AMS  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 36  | SAME DAY SURGERY                          | D22     | D22   | SDS  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 37  | LABOR & DELIVERY SERVICES                 | D23     | D23   | DEL  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 38  | OPERATING ROOM                            | D24     | D24   | OR   | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 39  | OPERATING ROOM CLINIC                     | D24a    | D24a  | ORC  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 40  | ANESTHESIOLOGY                            | D25     | D25   | ANS  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 41  | LABORATORY SERVICES                       | D28     | D28   | LAB  | 4.2          | 0.0    | 0.0             | 11.41% | 0                             | 33             | 33            | 32.7                    |
| 42  | ELECTROCARDIOGRAPHY                       | D30     | D30   | EKG  | 0.1          | 0.0    | 0.0             | 0.36%  | 0                             | 1              | 1             | 1.0                     |
| 43  | INTERVENTIONAL RADIOLOGY / CARDIOVASCULAR | D31     | D31   | IRC  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 44  | RADIOLOGY-DIAGNOSTIC                      | D32     | D32   | RAD  | 4.1          | 0.0    | 0.0             | 4.64%  | 0                             | 13             | 13            | 13.3                    |
| 45  | CT SCANNER                                | D33     | D33   | CAT  | 3.7          | 0.0    | 0.0             | 5.35%  | 0                             | 15             | 15            | 15.3                    |
| 46  | RADIOLOGY-THERAPEUTIC                     | D34     | D34   | RAT  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 47  | NUCLEAR MEDICINE                          | D35     | D35   | NUC  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 48  | RESPIRATORY THERAPY                       | D36     | D36   | RES  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 49  | PULMONARY FUNCTION TESTING                | D37     | D37   | PUL  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 50  | ELECTROENCEPHALOGRAPHY                    | D38     | D38   | EEG  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 51  | PHYSICAL THERAPY                          | D39     | D39   | PTH  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 52  | OCCUPATIONAL THERAPY                      | D40     | D40   | OTH  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 53  | SPEECH LANGUAGE PATHOLOGY                 | D41     | D41   | STH  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 54  | RECREATIONAL THERAPY                      | D42     | D42   | REC  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 55  | AUDIOLOGY                                 | D43     | D43   | AUD  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 56  | OTHER PHYSICAL MEDICINE                   | D44     | D44   | OPM  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 57  | RENAL DIALYSIS                            | D45     | D45   | RDL  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 58  | ORGAN ACQUISITION                         | D46     | D46   | OA   | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 59  | AMBULATORY SURGERY                        | D47     | D47   | AOR  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 60  | LEUKOPHERESIS                             | D48     | D48   | LEU  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 61  | HYPERBARIC CHAMBER                        | D49     | D49   | HYP  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

OADP C

INSTITUTION NAME: Shore Emergency Center at Queenstown  
 INSTITUTION NUMBER: 210088  
 FISCAL YEAR: 6/30/2018

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

| /// | DISTRIBUTION OF LOSS PER FTE         | LOOK UP | SCHED | CODE    | NO. OF FTE'S | C x DI | FTE'S ALLOCATED | BASIS  | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|--------------------------------------|---------|-------|---------|--------------|--------|-----------------|--------|-------------------------------|----------------|---------------|-------------------------|
| 62  | FREE STANDING EMERGENCY              | D50     | D50   | FSE     | 21.4         | 0.0    | 0.0             | 54.52% | 0                             | 156            | 156           | 156.4                   |
| 63  | MAGNETIC RESONANCE IMAGING           | D51     | D51   | MRI     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 64  | ADOLESCENT DUAL DIAGNOSED            | D52     | D52   | ADD     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 65  | LITHOTRIPSY                          | D53     | D53   | LIT     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 66  | REHABILITATION                       | D54     | D54   | RHB     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 67  | OBSERVATION                          | D55     | D55   | OBV     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 68  | AMBULANCE SERVICES-REBUNDLED         | D56     | D56   | AMR     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 69  | TRANSURETHAL MICROWAVE THERMOTHERAPY | D57     | D57   | TMT     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 70  | ONCOLOGY O/P CLINIC                  | D58     | D58   | OCL     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 71  | TRANSURETHAL NEEDLE ABLATION         | D59     | D59   | TNA     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 72  | PSYCHIATRIC ADULT                    | D70     | D70   | PAD     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 73  | PSYCHIATRIC CHILD/ADOLESCENT         | D71     | D71   | PCD     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 74  | PSYCHIATRIC GERIATRIC                | D73     | D73   | PSG     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 75  | INDIVIDUAL THERAPIES                 | D74     | D74   | ITH     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 76  | GROUP THERAPIES                      | D75     | D75   | GTH     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 77  | FAMILY THERAPIES                     | D76     | D76   | FTH     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 78  | PSYCHOLOGICAL TESTING                | D77     | D77   | PST     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 79  | EDUCATION                            | D78     | D78   | PSE     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 80  | OTHER THERAPIES                      | D79     | D79   | OPT     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 81  | ELECTROCONVULSIVE THERAPY            | D80     | D80   | ETH     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 82  | ACTIVITY THERAPIES                   | D81     | D81   | ATH     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 83  | PEDIATRIC STEP-DOWN                  | D82     | D82   | PSD     | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 84  | 340B CLINIC SERVICES                 | D83     | D83   | CL-340  | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 85  | 340B RADIOLOGY - THERAPEUTIC         | D84     | D84   | RAT-340 | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 86  | 340B OR CLINIC SERVICES              | D85     | D85   | ORC-340 | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 87  | 340B LABORATORY SERVICES             | D86     | D86   | LAB-340 | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 88  | 340B DRUGS                           | D87     | D87   | CDS-340 | 0.0          | 0.0    | 0.0             | 0.00%  | 0                             | 0              | 0             | -                       |
| 89  | AMBULANCE SERVICES                   | E01     | E01   | AMB     | 0.0          | 0.0    |                 |        |                               |                |               | -                       |
| 90  | PARKING                              | E02     | E02   | PAR     |              |        |                 |        |                               |                |               | -                       |
| 91  | DOCTOR'S PRIVATE OFFICE RENT         | E03     | E03   | DPO     | 0.0          | 0.0    |                 |        |                               |                |               | -                       |
| 92  | OFFICE & OTHER RENTAL                | E04     | E04   | OOR     | 0.0          | 0.0    |                 |        |                               |                |               | -                       |
| 93  | RETAIL OPERATIONS                    | E05     | E05   | REO     | 0.0          | 0.0    |                 |        |                               |                |               | -                       |
| 94  | PATIENTS TELEPHONES                  | E06     | E06   | PTE     | 0.0          | 0.0    |                 |        |                               |                |               | -                       |
| 95  | RESEARCH                             | F01     | F01   | REG     | 0.0          | 0.0    |                 |        |                               |                |               | -                       |
| 96  | NURSING EDUCATION                    | F02     | F02   | RNS     | 0.2          | 0.0    |                 |        |                               |                |               | -                       |
| 97  | OTHER HEALTH PROFESSION EDUCATION    | F03     | F03   | OHE     | 0.0          | 0.0    |                 |        |                               |                |               | -                       |
| 98  | COMMUNITY HEALTH EDUCATION           | F04     | F04   | CHE     | 0.0          | 0.0    |                 |        |                               |                |               | -                       |
| 99  | MED/SURG ACUTE                       | D01     | P2A   | MSG     | 0.0          | 0.0    |                 |        |                               |                |               | -                       |
| 100 | PEDIATRIC ACUTE                      | D02     | P2A   | PED     | 0.0          | 0.0    |                 |        |                               |                |               | -                       |



ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: Shore Emergency Center at Queenstown  
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COL. 1      COL. 2      COL. 3      COL. 4      COL. 5      COL. 6      COL. 7      COL. 8

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

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: Shore Emergency Center at Queenstown  
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COL. 1 COL. 2 COL. 3 COL. 4 COL. 5 COL. 6 COL. 7 COL. 8

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

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

OADP F

INSTITUTION NAME: Shore Emergency Center at Queenstown  
 INSTITUTION NUMBER: 210088  
 FISCAL YEAR: 6/30/2018

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

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

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: Shore Emergency Center at Queenstown  
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COL. 1 COL. 2 COL. 3 COL. 4 COL. 5 COL. 6 COL. 7 COL. 8

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

|     |                    |     |     |     |     |     |  |  |  |  |  |  |   |
|-----|--------------------|-----|-----|-----|-----|-----|--|--|--|--|--|--|---|
| 258 | EMERGENCY SERVICES | D18 | P4C | EMG | 0.0 | 0.0 |  |  |  |  |  |  | - |
|-----|--------------------|-----|-----|-----|-----|-----|--|--|--|--|--|--|---|

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

OADP H

INSTITUTION NAME: Shore Emergency Center at Queenstown  
 INSTITUTION NUMBER: 210088  
 FISCAL YEAR: 6/30/2018

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

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

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

OADP I

INSTITUTION NAME: Shore Emergency Center at Queenstown  
 INSTITUTION NUMBER: 210088  
 FISCAL YEAR: 6/30/2018

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

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

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: Shore Emergency Center at Queenstown  
 INSTITUTION NUMBER: 210088  
 FISCAL YEAR: 6/30/2018

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

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



ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: Shore Emergency Center at Queenstown  
 INSTITUTION NUMBER: 210088  
 FISCAL YEAR: 6/30/2018

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

| /// | DISTRIBUTION OF LOSS PER FTE | LOOK UP | SCHED | CODE    | NO. OF FTE'S | C x DI | FTE'S ALLOCATED | BASIS   | WAGES, SALARIES, & F. BENEFIT | OTHER EXPENSES | DP ALLOCATION | TOTAL ALLOCATED EXPENSE |
|-----|------------------------------|---------|-------|---------|--------------|--------|-----------------|---------|-------------------------------|----------------|---------------|-------------------------|
| 369 | PSYCHIATRIC CHILD/ADOLESCENT | D71     | P5I   | PCD     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 370 | PSYCHIATRIC GERIATRIC        | D73     | P5I   | PSG     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 371 | INDIVIDUAL THERAPIES         | D74     | P5I   | ITH     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 372 | GROUP THERAPIES              | D75     | P5I   | GTH     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 373 | FAMILY THERAPIES             | D76     | P5I   | FTH     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 374 | PSYCHOLOGICAL TESTING        | D77     | P5I   | PST     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 375 | EDUCATION                    | D78     | P5I   | PSE     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 376 | OTHER THERAPIES              | D79     | P5J   | OPT     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 377 | ELECTROCONVULSIVE THERAPY    | D80     | P5J   | ETH     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 378 | ACTIVITY THERAPIES           | D81     | P5J   | ATH     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 378 | PEDIATRIC STEP-DOWN          | D82     | P5J   | PSD     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 379 | 340B CLINIC SERVICES         | D83     | P5J   | CL-340  | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 380 | 340B RADIOLOGY - THERAPEUTIC | D84     | P5J   | RAT-340 | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 381 | 340B OR CLINIC SERVICES      | D85     | P5J   | ORC-340 | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 382 | 340B LABORATORY SERVICES     | D86     | P5J   | LAB-340 | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 383 | 340B DRUGS                   | D87     | P5J   | CDS-340 | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 384 | FREESTANDING CLINIC SERVICES | UR01    | UR01  | FSC1    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 385 | HOME HEALTH SERVICES         | UR02    | UR02  | HHC     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 386 | OUTPATIENT RENAL DIALYSIS    | UR03    | UR03  | ORD     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 387 | SKILLED NURSING CARE         | UR04    | UR04  | ECF1    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 388 | LABORATORY NON-PATIENT       | UR05    | UR05  | ULB     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 389 | PHYSICIANS PART B SERVICES   | UR06    | UR06  | UPB     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 390 | CERTIFIED NURSE ANESTHETISTS | UR07    | UR07  | CNA     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 391 | PHYSICIAN SUPPORT SERVICES   | UR08    | UR08  | PSS     | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 392 | TBD                          | UR09    | UR09  | TBA2    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 393 | TBD                          | UR10    | UR10  | TBA3    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 394 | TBD                          | UR11    | UR11  | TBA4    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 395 | TBD                          | UR12    | UR12  | TBA5    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 396 | TBD                          | UR13    | UR13  | TBA6    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 397 | TBD                          | UR14    | UR14  | TBA7    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| 398 | TBD                          | UR15    | UR15  | TBA8    | 0.0          | 0.0    |                 |         |                               |                |               | -                       |
| E   | TOTALS                       |         |       |         | 45.7         | 0.0    | 0.0             | 100.00% | 0.0                           | 286.8          | 286.8         | 286.8                   |

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

**RC**

INSTITUTION NAME: Shore Emergency Center at Queenstown FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

|    | Expenses                            | Sources                         | HSCRC Regulated | Unregulated | Total      |    |
|----|-------------------------------------|---------------------------------|-----------------|-------------|------------|----|
| A  | Unassigned Expense                  | Sch. UA, Col. 10                | 520.0           | 0.0         | 520.0      | A  |
| B  | Physicians Part B Services          | P2 Ln A Col 7<br>UR6 Ln B Col 3 | 0.0             | 0.0         | 0.0        | B  |
| C  | Physician Support Services          | Sch. P3, Line A, Col. 7<br>UR   | 0.0             |             | 0.0        | C  |
| D  | Resident, Intern Services           | Sch. P4 & P5 , Line A, Col. 7   | 0.0             | 0.0         | 0.0        | D  |
| E  | Overhead Expense Survey             | Sch OES, Line P, Col. 1         | 1,746.2         | 0.0         | 1,746.2    | E  |
| F  | Patient Care Centers                | Schs D1 - D81, Line B, Col. 4   | 4,389.8         | //////////  | 4,389.8    | F  |
| G  | Auxiliary Enterprises               | Schs E1 - E9 Line B, Col 3      | 0.0             | 0.0         | 0.0        | G  |
| H  | Other Institution Programs          | Schs F1 - F4, Line B, Col 3     | //////////      | 16.3        | 16.3       | H  |
| I  | Unregulated Services                | Schs UR1-UR15 Less Ln B & C     | //////////      | 0.0         | 0.0        | I  |
| J  | Total Operating Expenses            | A+B+C+D+E+F+G+H+I               | 6,656.0         | 16.3        | 6,672.3    | J  |
| K  | Non-Operating Expenses              | Non-Operating Expenses          | //////////      | 0.0         | 0.0        | K  |
| L  | Total Expenses                      | J + K                           | 6,656.0         | 16.3        | 6,672.3    | L  |
| M  | Total Operating Expenses - RE       | Sche RE, Line S                 | 6,656.0         | 16.3        | 6,672.3    | M  |
| N  | Non-Operating Expenses - RE         | Sche RE, Line V                 | //////////      | 0.0         | 0.0        | N  |
| O  | Total Expenses - RE                 | M + N                           | 6,656.0         | 16.3        | 6,672.3    | O  |
| P  | Reconciliation Amount               | O - L                           | (0.0)           | 0.0         | (0.0)      | P  |
| Q  | Nomenclature                        | //////////                      | //////////      | //////////  | ////////// | Q  |
| Q1 | Other Non-Operating Expense         | Audited Financial Statements    | 0.0             | 0.0         | 0.0        | Q1 |
| Q2 | Rounding                            |                                 | 0.0             | 0.0         | 0.0        | Q2 |
| Q3 | O/H Exp Alloc. to Aux Ent. Fringe   | E Schedules                     | 0.0             | 0.0         | 0.0        | Q3 |
| Q4 | Aux Ent. Loss Allocated to F and UR | OA Schedule                     | 0.0             | 0.0         | 0.0        | Q4 |
| Q5 | Ineligible Interns/Residents        | P5 Schedule                     | 0.0             | 0.0         | 0.0        | Q5 |
| Q6 |                                     |                                 |                 |             |            | Q6 |

## STATEMENT OF REVENUE AND EXPENSES

RE

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL

6/30/2018INSTITUTION NUMBER: 210088

|                                  |  | COL 1     | COL 2       | COL 3     |    |
|----------------------------------|--|-----------|-------------|-----------|----|
|                                  |  | Regulated | Unregulated | Total     |    |
| <b>Operating Revenues:</b>       |  | xxxx      | xxxx        | xxxx      |    |
| A                                | Gross Revenues from Daily Hospital Services                              | 0.0       | 0.0         | 0.0       | A  |
| B                                | Gross Revenues from Ambulatory Services                                  | 4,508.1   | 0.0         | 4,508.1   | B  |
| C                                | Gross Revenues from Inpatient Ancillary Services                         | 0.0       | 0.0         | 0.0       | C  |
| D                                | Gross Revenues from Outpatient Ancillary Services                        | 2,526.8   | 0.0         | 2,526.8   | D  |
| E                                | Gross Patient Revenues   | 7,034.9   | 0.0         | 7,034.9   | E  |
| <b>Deductions from Revenues:</b> |  | xxxx      | xxxx        | xxxx      |    |
| F                                | Provision for Bad Debts  | 845.5     | 0.0         | 845.5     | F  |
| G                                | Charity/Uncompensated Care   | 86.7      | 0.0         | 86.7      | G  |
| H                                | Contractual Adjustments  | 239.2     | 0.0         | 239.2     | H  |
| H1                               | Uncompensated Care Fund Payments   | (0.0)     | 0.0         | (0.0)     | H1 |
| H2                               | Denials  | 456.2     | 0.0         | 456.2     | H2 |
| I                                | Other Deductions from Revenues   | 29.2      | 0.0         | 29.2      | I  |
| J                                | Total Deductions from Revenues   | 1,656.8   | 0.0         | 1,656.8   | J  |
| J1                               | Uncompensated Care Fund Receipts   | 0.0       | 0.0         | 0.0       | J1 |
| K                                | Net Patient Revenues   | 5,378.1   | 0.0         | 5,378.1   | K  |
| L                                | Other Operating Revenues   | 9.1       | 0.0         | 9.1       | L  |
| M                                | Net Operating Revenues   | 5,387.2   | 0.0         | 5,387.2   | M  |
| <b>Operating Expenses:</b>       |  | xxxx      | xxxx        | xxxx      |    |
| N                                | Salaries, Wages, and Employee Benefits                                   | 3,272.2   | 16.3        | 3,288.5   | N  |
| O                                | Professional Fees  | 1,441.3   | 0.0         | 1,441.3   | O  |
| P                                | Supplies   | 477.1     | 0.0         | 477.1     | P  |
| Q                                | Depreciation/Amortization, Leases/Rentals                                | 468.2     | 0.0         | 468.2     | Q  |
| R                                | Other Expenses   | 997.2     | 0.0         | 997.2     | R  |
| S                                | Total Operating Expenses   | 6,656.0   | 16.3        | 6,672.3   | S  |
| T                                | <b>Excess (Deficit) Operating Revenues Over Operating Expenses</b>       | (1,268.8) | (16.3)      | (1,285.1) | T  |
| U                                | Non-Operating Revenues   | xxxx      | (21.0)      | (21.0)    | U  |
| V                                | Non-Operating Expenses   | xxxx      | 0.0         | 0.0       | V  |
| W                                | <b>Excess (Deficit) Revenues Over Expenses-Regulated and Unregulated</b> | (1,268.8) | (37.3)      | (1,306.1) | W  |
| X                                | Operating Expenses per EIPD  | 0.00000   | xxxx        | xxxx      | X  |
| Y                                | Operating Expenses per EIPA  | 0.00000   | xxxx        | xxxx      | Y  |
| Z                                | Working Capital Ratio = Current Assets/Current Liabilities               | 0.7       | xxxx        | xxxx      | Z  |
| AA                               | Admissions   | 0         | 0           | 0         | AA |
| BB                               | EIPA's   | 0         |             | 0         | BB |

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

INSTITUTION NAME: Shore Emergency Center at Queenstown

RE - R 1

INSTITUTION NO.: 210088

|                              | Col. 1                             | Col. 2                       | Col. 3                | Col. 4  | Col. 5     | Col. 6       | Col. 7      | Col. 8     | Col. 9    |
|------------------------------|------------------------------------|------------------------------|-----------------------|---------|------------|--------------|-------------|------------|-----------|
|                              | Audited<br>Financial<br>Statements | Miscellaneous<br>Adjustments | AUXILIARY ENTERPRISES |         |            |              |             |            |           |
|                              |                                    |                              | E01                   | E02     | E03        | E04          | E05         | E06        | E07       |
|                              |                                    |                              | Ambulance             | Parking | Dr. Office | Other Office | Retail Ops. | Pt. Phones | Cafeteria |
| Gross Patient Revenue        | 7,005.7                            | 29.2                         | -                     | -       | -          | -            | -           | -          | -         |
| Provision for Bad Debt       | 845.5                              | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Charity Care                 | 86.7                               | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Contractual Allowances       | 695.4                              | 29.2                         | -                     | -       | -          | -            | -           | -          | -         |
| Total Deductions             | 1,627.6                            | 29.2                         | -                     | -       | -          | -            | -           | -          | -         |
| Net Patient Revenue          | 5,378.1                            | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Other Operating Revenue      | 9.1                                | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Total Operating Revenue      | 5,387.2                            | -                            | -                     | -       | -          | -            | -           | -          | -         |
| <b>Operating Expenses:</b>   |                                    |                              |                       |         |            |              |             |            |           |
| Salaries, Wages and Benefits | 3,307.9                            | (19.5)                       | -                     | -       | -          | -            | -           | -          | -         |
| Professional Fees            | 1,441.3                            | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Supplies                     | 477.1                              | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Depreciation / Amortization  | 467.3                              | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Leases / Rentals             | -                                  | 0.9                          | -                     | -       | -          | -            | -           | -          | -         |
| Interest                     | 121.3                              | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Other Expenses               | 857.4                              | 18.5                         | -                     | -       | -          | -            | -           | -          | -         |
| Total Operating Expense      | 6,672.3                            | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Income from Operations       | (1,285.1)                          | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Non-Operating Revenues       | (21.0)                             | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Non-Operating Expenses       | -                                  | -                            | -                     | -       | -          | -            | -           | -          | -         |
| Excess Revenue Over Expenses | (1,306.1)                          | -                            | -                     | -       | -          | -            | -           | -          | -         |

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

INSTITUTION NAME: Shore Emergency

RE - R 2

INSTITUTION NO.: 210088

|                              | Col. 10               | Col. 11 | Col. 12                      | Col. 13     | Col. 14         | Col. 15         | Col. 16     | Col. 17     | Col. 18   |
|------------------------------|-----------------------|---------|------------------------------|-------------|-----------------|-----------------|-------------|-------------|-----------|
|                              | AUXILIARY ENTERPRISES |         | OTHER INSTITUTIONAL PROGRAMS |             |                 |                 | UNREGULATED |             |           |
|                              | E08                   | E09     | F01                          | F02         | F03             | F04             | UR01        | UR02        | UR03      |
|                              | Day Care              | Housing | Research                     | Nursing Ed. | Other Hlth. Ed. | Comm. Hlth. Ed. | FSC         | Home Health | O/P Renal |
| Gross Patient Revenue        | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Provision for Bad Debt       | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Charity Care                 | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Contractual Allowances       | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Total Deductions             | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Net Patient Revenue          | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Other Operating Revenue      | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Total Operating Revenue      | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| <b>Operating Expenses:</b>   |                       |         |                              |             |                 |                 |             |             |           |
| Salaries, Wages and Benefits | -                     | -       | -                            | 16.3        | -               | -               | -           | -           | -         |
| Professional Fees            | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Supplies                     | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Depreciation / Amortization  | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Leases / Rentals             | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Interest                     | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Other Expenses               | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Total Operating Expense      | -                     | -       | -                            | 16.3        | -               | -               | -           | -           | -         |
| Income from Operations       | -                     | -       | -                            | (16.3)      | -               | -               | -           | -           | -         |
| Non-Operating Revenues       | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Non-Operating Expenses       | -                     | -       | -                            | -           | -               | -               | -           | -           | -         |
| Excess Revenue Over Expenses | -                     | -       | -                            | (16.3)      | -               | -               | -           | -           | -         |

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

INSTITUTION NAME: Shore Emergency

INSTITUTION NO.: 210088

|                              | Col. 19     | Col. 20     | Col. 21     | Col. 22 | Col. 23 | Col. 23a | Col. 23b | Col. 23c | Col. 23d |
|------------------------------|-------------|-------------|-------------|---------|---------|----------|----------|----------|----------|
|                              | UNREGULATED |             |             |         |         |          |          |          |          |
|                              | UR04        | UR05        | UR06        | UR07    | UR08    | UR09     | UR10     | UR11     | UR12     |
|                              | SNF         | Non-Pt. Lab | Phys. Pt. B | CNA     | PSS     | TBD      | TBD      | TBD      | TBD      |
| Gross Patient Revenue        | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Provision for Bad Debt       | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Charity Care                 | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Contractual Allowances       | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Total Deductions             | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Net Patient Revenue          | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Other Operating Revenue      | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Total Operating Revenue      | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| <b>Operating Expenses:</b>   |             |             |             |         |         |          |          |          |          |
| Salaries, Wages and Benefits | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Professional Fees            | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Supplies                     | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Depreciation / Amortization  | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Leases / Rentals             | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Interest                     | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Other Expenses               | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Total Operating Expense      | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Income from Operations       | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Non-Operating Revenues       | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Non-Operating Expenses       | -           | -           | -           | -       | -       | -        | -        | -        | -        |
| Excess Revenue Over Expenses | -           | -           | -           | -       | -       | -        | -        | -        | -        |

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

INSTITUTION NAME: Shore Emergency

RE - R 3

INSTITUTION NO.: 210088

|                              | Col. 23e | Col. 23f | Col. 23g | Col. 24              | Col. 25            | Col. 26        | Col. 27    |
|------------------------------|----------|----------|----------|----------------------|--------------------|----------------|------------|
|                              | UR13     | UR14     | UR15     | TOTAL<br>UNREGULATED | TOTAL<br>REGULATED | SCHEDULE<br>RE | RE<br>LINE |
|                              | TBD      | TBD      | TBD      |                      |                    |                |            |
| Gross Patient Revenue        | -        | -        | -        | -                    | 7,034.9            | 7,034.9        | E          |
| Provision for Bad Debt       | -        | -        | -        | -                    | 845.5              | 845.5          | F          |
| Charity Care                 | -        | -        | -        | -                    | 86.7               | 86.7           | G          |
| Contractual Allowances       | -        | -        | -        | -                    | 724.6              | 724.6          | H          |
| Total Deductions             | -        | -        | -        | -                    | 1,656.8            | 1,656.8        | J          |
| Net Patient Revenue          | -        | -        | -        | -                    | 5,378.1            | 5,378.1        | K          |
| Other Operating Revenue      | -        | -        | -        | -                    | 9.1                | 9.1            | L          |
| Total Operating Revenue      | -        | -        | -        | -                    | 5,387.2            | 5,387.2        | M          |
| <b>Operating Expenses:</b>   |          |          |          |                      |                    |                |            |
| Salaries, Wages and Benefits | -        | -        | -        | 16.3                 | 3,272.2            | 3,288.5        | N          |
| Professional Fees            | -        | -        | -        | -                    | 1,441.3            | 1,441.3        | O          |
| Supplies                     | -        | -        | -        | -                    | 477.1              | 477.1          | P          |
| Depreciation / Amortization  | -        | -        | -        | -                    | 467.3              | 467.3          | Q          |
| Leases / Rentals             | -        | -        | -        | -                    | 0.9                | 0.9            | Q          |
| Interest                     | -        | -        | -        | -                    | 121.3              | 121.3          | R          |
| Other Expenses               | -        | -        | -        | -                    | 876.0              | 876.0          | R          |
| Total Operating Expense      | -        | -        | -        | 16.3                 | 6,656.0            | 6,672.3        | S          |
| Income from Operations       | -        | -        | -        | (16.3)               | (1,268.8)          | (1,285.1)      | T          |
| Non-Operating Revenues       | -        | -        | -        | (21.0)               | XXXXX              | (21.0)         | U          |
| Non-Operating Expenses       | -        | -        | -        | -                    | XXXXX              | -              | V          |
| Excess Revenue Over Expenses | -        | -        | -        | (37.3)               | (1,268.8)          | (1,306.1)      | W          |

OVERHEAD STATISTICAL APPOINTMENT

JSI & JS2

INSTITUTION NAME: Shore Emergency Center at Oronotom  
 INSTITUTION NUMBER: 210098

FISCAL YEAR

6/30/2018

| UNIT COST CALCULATIONS                       | COL 1<br>DIETARY MEALS | COL 2<br>LAUNDRY & LINEN POUNDS | COL 3<br>PURCHASING STORES OTH EXP SCHED | COL 4<br>HOUSEKEEPING # OF HOURS | COL 5<br>CENT SUPPLY PHARMACY SOCIAL SERV | COL 6<br>PLANT OPERATIONS NET SQ FEET | COL 7<br>INPATIENT: PAC, MRD FIS.MGT.NAD | COL 7.A<br>AMBULATORY: PAC, MRD FIS.MGT.NAD | COL 8<br>OUTPATIENT: PAC, MRD FIS.MGT.NAD | COL 9<br>MED STAFF ADMIN EIPAs | COL 10<br>UNASSIGNED EXPENSES |
|--|------------------------|---------------------------------|--|----------------------------------|---|---------------------------------------|--|---|---|--------------------------------|-------------------------------|
| A Overhead Expenses                          | 0.0                    | 66.1                            | 22.2                                     | 108.4                            | 54.9                                      | 446.8                                 | 0.0                                      | 0.0   | 829.0                                     | 59.9                           | (69.8)                        |
| B Units                                      | 0                      | 46,968                          | 464                                      | 3,374                            | 55  | 12,104                                | 0.0                                      | 0.0   | 4,397.2                                   | 0                              | 5,869.7                       |
| C Cost per unit                              | 0.000000               | 0.001407                        | 0.047894                                 | 0.032124                         | 1.000000                                  | 0.036910                              | 0.000000                                 | 0.000000                                    | 0.188526                                  | 0.000000                       | (0.011892)                    |
| <b>STATISTICAL APPOINTMENT</b>               |                        |                                 |  |                                  |   |                                       |  |   |   |                                |                               |
| 1 Med/Surg Acute                             | MSG                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 2 Pediatric Acute                            | PED                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 3 Psychiatric Acute                          | PSY                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 4 Obstetrics Acute                           | OBS                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 5 Definitive Observation                     | DEF                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 6 Med/Surg Intensive Care                    | MIS                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 7 Coronary Care                              | CCU                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 8 Pediatric Intensive Care                   | PIC                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 9 Neonatal Intensive Care                    | NEO                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 10 Burn Care                                 | BUR                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 11 Psychiatric Intensive Care                | PSI                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 12 Shock Trauma                              | TRM                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 13 Oncology                                  | ONC                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 14 Newborn Nursery                           | NLR                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 15 Premature Nursery                         | PRE                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 16 Chronic Care                              | CRH                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 17 Emergency Services                        | EMG                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 18 Clinical Services                         | CL                     | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 19 Psych. Day & Night Care                   | PDC                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 21 Ambulatory Surgery (PBP)                  | AMS                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 20 Same Day Surgery                          | SDS                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 22 Labor & Delivery Services                 | PRE                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 23 Operating Room                            | OR                     | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 24 Operating Room Clinic                     | ORC                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 25 Anesthesiology                            | ANS                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 26 Laboratory Services                       | LAB                    | 0                               | 0  | 184.2                            | 162                                       | 509                                   | 0  | 0   | 665.1                                     | 0                              | 823.3                         |
| 27 Electrocardiography                       | EKG                    | 0                               | 0  | 19                               | 19  | 59                                    | 0  | 0   | 7.9                                       | 0                              | 12.3                          |
| 28 Interventional Radiology / Cardiovascular | IRC                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 29 Radiology-Diagnostic                      | RAD                    | 0                               | 0  | 48.0                             | 245                                       | 771                                   | 0  | 0   | 287.4                                     | 0                              | 386.2                         |
| 30 CT Scanner                                | CAT                    | 0                               | 0  | 46.6                             | 112                                       | 356                                   | 0  | 0   | 262.9                                     | 0                              | 331.5                         |
| 31 Radiology-Therapeutic                     | RAT                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 32 Nuclear Medicine                          | NLC                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 33 Respiratory Therapy                       | RES                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 34 Pulmonary Function Testing                | PUL                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 35 Electroencephalography                    | EEG                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 36 Physical Therapy                          | PTH                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 37 Occupational Therapy                      | OTH                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 38 Speech Language Pathology                 | STH                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 39 Recreational Therapy                      | REC                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 40 Audiology                                 | AUD                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 41 Other Physical Medicine                   | OPM                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 42 Renal Dialysis                            | RDL                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 43 Organ Acquisition                         | OA                     | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 44 Ambulatory Surgery                        | AOR                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 45 Leukopheresis                             | LEU                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 46 Hyperbaric Chamber                        | HYP                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 47 Free Standing Emergency                   | FSF                    | 0                               | 46,968                                   | 183.7                            | 2,815                                     | 9,309                                 | 0  | 0   | 3,118.9                                   | 0                              | 4,216.9                       |
| 48 Magnetic Resonance Imaging                | MRI                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 49 Adolescent Dual Diagnosis                 | ADD                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 50 Lithotripsy                               | LIT                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 51 Rehabilitation                            | RHB                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 52 Observation                               | OBV                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 53 Ambulance Services-Rebundled              | AMR                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 54 Transurethral Microwave Thermotherapy     | TMT                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 55 Oncology OP Clinic                        | OCCL                   | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 56 Transurethral Needle Ablation             | TNA                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 57 Pediatric Step-Down                       | PSD                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 58 340B Clinic Services                      | CL-340                 | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 59 340B Radiology - Therapeutic              | RAT-340                | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 60 340B OR Clinic Services                   | ORC-340                | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 61 340B Laboratory Services                  | LAB-340                | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 62 340B Drugs                                | CDS-340                | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 63 Admission Services                        | ADM                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 0.0                           |
| 64 Med/Surg Supplies                         | MSS                    | 0                               | 0  | 0                                | 0   | 0                                     | 0  | 0   | 0   | 0                              | 20.3                          |
| 65 Drugs Sold                                | CDS                    | 0                               | 0  | 0                                | 0   | 54.9                                  | 0  | 0   | 54.9                                      | 0                              | 85.6                          |
| <b>E TOTAL</b>                               |                        | 0                               | 46,968                                   | 464.5                            | 3,374                                     | 54.9                                  | 12,104                                   | 0.0   | 4,397.2                                   | 0                              | 5,869.7                       |



OVERHEAD EXPENSE APPORTIONMENT

J1 & J2

FISCAL YEAR

6/30/2018

INSTITUTION NAME: Shore Emergency Center at Oceanfront  
 INSTITUTION NUMBER: 21088

|  | COL 1         | COL 2                  | COL 3                           | COL 4                   | COL 5                            | COL 6                        | COL 7                       | COL 8                           | COL 8 A                          | COL 9                            | COL 10                 | COL 11              | COL 12               | COL 13                   |
|--|---------------|------------------------|---------------------------------|-------------------------|----------------------------------|------------------------------|-----------------------------|---------------------------------|----------------------------------|----------------------------------|------------------------|---------------------|----------------------|--------------------------|
| ALLOCATED CENTERS                            | DIETARY MEALS | LAUNDRY & LINEN POUNDS | PURCHASING STORES OTH EXP SCHED | HOUSEKEEPING # OF HOURS | CENT SUPPLY PHARMACY SOCIAL SERV | PLANT OPERATIONS NET SQ FEET | TOTAL PATIENT CARE OVERHEAD | INPATIENT: PAC, MRD FTS,MGT,NAD | AMBULATORY: PAC, MRD FTS,MGT,NAD | OUTPATIENT: PAC, MRD FTS,MGT,NAD | MED STAFF ADMIN TRP-AS | UNASSIGNED EXPENSES | TOTAL OTHER OVERHEAD | TOTAL ALLOCATED OVERHEAD |
| A Overhead Expenses                          | 0.0           | 66.1                   | 22.2                            | 108.4                   | 54.9                             | 446.8                        | 698.4                       | 0.0                             | 0.0                              | 829.0                            | 59.9                   | (69.8)              | 819.1                | 1,517.5                  |
| <b>REVENUE CENTERS</b>                       |               |                        |                                 |                         |                                  |                              |                             |                                 |                                  |                                  |                        |                     |                      |                          |
| 1 Med/Surg Acute                             | MSG           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 2 Pediatric Acute                            | PED           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 3 Psychiatric Acute                          | PSY           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 4 Obstetrics Acute                           | OBS           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 5 Definitive Observation                     | DEF           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 6 Med/Surg Intensive Care                    | MIS           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 7 Coronary Care                              | CCU           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 8 Pediatric Intensive Care                   | PIC           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 9 Neonatal Intensive Care                    | NEO           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 10 Burn Care                                 | BUR           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 11 Psychiatric Intensive Care                | PSI           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 12 Shock Trauma                              | TRM           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 13 Oncology                                  | ONC           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 14 Newborn Nursery                           | NBR           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 15 Premature Nursery                         | PRE           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 16 Chronic Care                              | CRH           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 17 Emergency Services                        | EMG           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 18 Clinical Services                         | CL            |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 19 Psych. Day & Night Care                   | PDC           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 20 Ambulatory Surgery (PBP)                  | AMS           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 21 Same Day Surgery                          | SDS           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 22 Labor & Delivery Services                 | DEL           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 23 Operating Room                            | OR            |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 24 Operating Room Clinic                     | ORC           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 25 Anesthesiology                            | ANS           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 26 Laboratory Services                       | LAB           |                        | 8.8                             | 5.2                     |                                  | 18.8                         | 23.8                        |                                 |                                  | 125.4                            |                        | (9.8)               | 115.6                | 148.4                    |
| 27 Electrocardiography                       | EKG           |                        | 0.1                             | 0.6                     |                                  | 2.2                          | 2.9                         |                                 |                                  | 1.5                              |                        | (0.1)               | 1.3                  | 4.2                      |
| 28 Interventional Radiology / Cardiovascular | IRC           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 29 Radiology-Diagnostic                      | RAD           |                        | 2.3                             | 7.9                     |                                  | 28.5                         | 38.6                        |                                 |                                  | 54.2                             |                        | (4.5)               | 49.7                 | 88.3                     |
| 30 CT Scanner                                | CAT           |                        | 2.2                             | 3.6                     |                                  | 13.1                         | 19.0                        |                                 |                                  | 49.6                             |                        | (3.9)               | 45.6                 | 64.6                     |
| 31 Radiology-Therapeutic                     | RAT           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 32 Nuclear Medicine                          | NUC           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 33 Respiratory Therapy                       | RES           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 34 Pulmonary Function Testing                | PFT           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 35 Electroencephalography                    | EEG           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 36 Physical Therapy                          | PTH           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 37 Occupational Therapy                      | OTH           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 38 Speech Language Pathology                 | STH           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 39 Recreational Therapy                      | REC           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 40 Audiology                                 | AUD           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 41 Other Physical Medicine                   | OPM           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 42 Renal Dialysis                            | RDR           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 43 Organ Acquisition                         | OA            |                        |                                 |                         |                                  | 0.0                          |                             |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 44 Ambulatory Surgery                        | AOR           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 45 Leukopheresis                             | LEU           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 46 Hypothermic Chamber                       | HYP           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 47 Free Standing Emergency                   | FSE           | 66.1                   | 8.8                             | 91.1                    |                                  | 343.6                        | 596.6                       |                                 |                                  | 588.0                            |                        | (50.1)              | 537.9                | 1,047.4                  |
| 48 Magnetic Resonance Imaging                | MRI           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 49 Adolescent Dual Diagnosed                 | ADD           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 50 Lithotripsy                               | LIT           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 51 Rehabilitation                            | RHB           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 52 Observation                               | OBV           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 53 Ambulance Services-Rebundled              | AMR           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 54 Transurethral Microwave Thermotherapy     | TMT           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 55 Oncology OP Clinic                        | OCL           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 56 Transurethral Needle Ablation             | TNA           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 57 Pediatric Step-Down                       | PSD           |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 58 340B Clinic Services                      | CL-340        |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 59 340B Radiology - Therapeutic              | RAT-340       |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 60 340B OR Clinic Services                   | ORC-340       |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 61 340B Laboratory Services                  | LAB-340       |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 62 340B Drugs                                | CDS-340       |                        |                                 |                         |                                  |                              | 0.0                         |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 63 Admission Services                        | ADM           |                        |                                 |                         |                                  | 0.0                          |                             |                                 |                                  |                                  |                        |                     | 0.0                  | 0.0                      |
| 64 Med/Surg Supplies                         | MSS           |                        |                                 |                         |                                  | 20.3                         | 20.3                        |                                 |                                  |                                  |                        | (0.2)               | 0.21                 | 20.1                     |
| 65 Drugs Sold                                | CDS           |                        |                                 |                         |                                  | 54.9                         | 20.3                        | 75.2                            |                                  | 10.4                             |                        | (1.0)               | 9.3                  | 84.5                     |
| E TOTAL                                      | 0.0           | 66.1                   | 22.2                            | 108.4                   | 54.9                             | 446.8                        | 698.4                       | 0.0                             | 0.0                              | 829.0                            | 0.0                    | (69.8)              | 759.2                | 1,457.6                  |

DEPARTMENTAL EQUIPMENT ALLOWANCE

H2

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER: 210088

|      |        | COL 1                          | COL 2 | COL 3                           | COL 4                         | COL 5                            | COL 6                         | COL 7                                  | COL 8                                |
|------|--------|--------------------------------|-------|---------------------------------|-------------------------------|----------------------------------|-------------------------------|--|--------------------------------------|
|      | CENTER | COST<br>BASE YEAR<br>PURCHASES | # YRS | CUMULATIVE<br>PURCHASE<br>TOTAL | DEPRECIATION<br>COL 3 / COL 2 | MKT VALUE<br>BASE YEAR<br>LEASES | CUMULATIVE<br>LEASES<br>TOTAL | LEASE<br>AMORTIZATION<br>COL 6 / COL 2 | DEPR/AMORT<br>TOTAL<br>COL 4 + COL 7 |
| H2A  | MIS    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2B  | CCU    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2C  | PIC    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2D  | NEO    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2E  | BUR    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2F  | TRM    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2G  | ONC    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2H  | OR     | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2I  | ORC    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2J  | AOR    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2K  | LAB    | 0.0                            | 10    | 397.0                           | 39.7                          | 0.0                              | 0.0                           | 0.0                                    | 39.7                                 |
| H2L  | IRC    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2M  | RAD    | 0.0                            | 10    | 399.5                           | 40.0                          | 0.0                              | 0.0                           | 0.0                                    | 40.0                                 |
| H2N  | CAT    | 0.0                            | 6.5   | 460.2                           | 70.8                          | 0.0                              | 0.0                           | 0.0                                    | 70.8                                 |
| H2O  | RAT    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2P  | NUC    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2Q  | RDL    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2R  | HYP    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2S  | DTY    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2T  | LL     | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2U  | MGT    | 0.0                            | 10    | 15.3                            | 1.5                           | 0.0                              | 0.0                           | 0.0                                    | 1.5                                  |
| H2V  | EDP    | 31.4                           | 10    | 167.1                           | 16.7                          | 0.0                              | 0.0                           | 0.0                                    | 16.7                                 |
| H2W  | MRI    | 0.0                            | 6     | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2X  | LIT    | 0.0                            | 5     | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2Y  | ETH    | 0.0                            | 10    | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2Z  | TRP    | 0.0                            | 5     | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
| H2AA | TMT    | 0.0                            | 5     | 0.0                             | 0.0                           | 0.0                              | 0.0                           | 0.0                                    | 0.0                                  |
|      | TOTAL  | 31.4                           |       | 1,439.1                         | 168.7                         | 0.0                              | 0.0                           | 0.0                                    | 168.7                                |

DISTRIBUTION OF CAPITAL FACILITIES ALLOWANCE

H3 A

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

| ALLOWANCE                      | Col. 1   | Col. 2  | Col. 3  | Col. 4  | Col. 5  | Col. 6    | Col. 7 | Col. 8 |   |
|--------------------------------|----------|---------|---------|---------|---------|-----------|--------|--------|---|
|                                | SOURCE   | GENERAL | DIETARY | LAUNDRY | COMM.   | DATA PROC | DEPART | TOTAL  |   |
| A INTEREST                     | RECORDS  | 120     | ////    | ////    | ////    | ////      | ////   | ////   | A |
| B TOTAL DEPRECIATION           | RECORDS  | 469.0   | ////    | ////    | ////    | ////      | ////   | ////   | B |
| C CAPITAL INTENSIVE EQUIP DEPR | TOTAL H2 | 168.7   | 0.0     | 0.0     | 1.5     | 16.7      | 150.4  | 337.4  | C |
| D BLDG & GEN EQUIP DEPR        | B - C    | 300.3   | ////    | ////    | ////    | ////      | ////   | 300.3  | D |
| E BLDG & GEN EQUIP DEPR & INT  | A + D    | 420.7   | 0.0     | 0.0     | 1.5     | 16.7      | 150.4  | 589.4  | E |
| F STANDARD UNITS               | ////     | 15,959  | 0       | 46,968  | 4,397   | 4,397     | ////   | ////   | F |
| G ALLOWANCE PER UNIT           | E / F    | 0.02636 | 0.00000 | 0.00000 | 0.00035 | 0.00380   | ////   | ////   | G |

| DISTRIBUTION                                 | CODE | ADI. SQUARE FOOTAGE BASIS |      |      |      |     |     |      |      |    |
|--|------|---------------------------|------|------|------|-----|-----|------|------|----|
| 1 Med/Surg Acute                             | MSG  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | //// | 0.0  | 1  |
| 2 Pediatric Acute                            | PED  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | //// | 0.0  | 2  |
| 3 Psychiatric Acute                          | PSY  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | //// | 0.0  | 3  |
| 4 Obstetrics Acute                           | OBS  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | //// | 0.0  | 4  |
| 5 Definitive Observation                     | DEF  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | //// | 0.0  | 5  |
| 6 Med/Surg Intensive Care                    | MIS  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 6  |
| 7 Coronary Care                              | CCU  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 7  |
| 8 Pediatric Intensive Care                   | PIC  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 8  |
| 9 Neonatal Intensive Care                    | NEO  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 9  |
| 10 Burn Care                                 | BUR  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 10 |
| 11 Psychiatric Intensive Care                | PSI  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | //// | 0.0  | 11 |
| 12 Shock Trauma                              | TRM  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 12 |
| 13 Oncology                                  | ONC  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 13 |
| 14 Newborn Nursery                           | NUR  | 0                         | 0.0  | //// | 0.0  | 0.0 | 0.0 | //// | 0.0  | 14 |
| 15 Premature Nursery                         | PRE  | 0                         | 0.0  | //// | 0.0  | 0.0 | 0.0 | //// | 0.0  | 15 |
| 16 Chronic Care                              | CRH  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | //// | 0.0  | 16 |
| 17 Emergency Services                        | EMG  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | //// | 0.0  | 17 |
| 18 Clinical Services                         | CL   | 0                         | 0.0  | //// | 0.0  | 0.0 | 0.0 | //// | 0.0  | 18 |
| 19 Psych. Day & Night Care                   | PDC  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | //// | 0.0  | 19 |
| 20 Same Day Surgery                          | SDS  | 0                         | 0.0  | 0.0  | 0.0  | 0.0 | 0.0 | //// | 0.0  | 20 |
| 21 Labor & Delivery Services                 | DEL  | 0                         | 0.0  | //// | 0.0  | 0.0 | 0.0 | //// | 0.0  | 21 |
| 22 Operating Room                            | OR   | 0                         | 0.0  | //// | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 22 |
| 23 Operating Room Clinic                     | ORC  | 0                         | 0.0  | //// | 0.0  | 0.0 | 0.0 | //// | 0.0  | 23 |
| 24 Anesthesiology                            | ANS  | 0                         | 0.0  | //// | 0.0  | 0.0 | 0.0 | //// | 0.0  | 24 |
| 25 Med/Surg Supplies                         | MSS  | 725                       | 19.1 | //// | //// | 0.0 | 0.0 | //// | 19.1 | 25 |
| 26 Drugs Sold                                | CDS  | 725                       | 19.1 | //// | //// | 0.0 | 0.2 | //// | 19.3 | 26 |
| 27 Laboratory Services                       | LAB  | 671                       | 17.7 | //// | 0.0  | 0.2 | 2.5 | 39.7 | 60.1 | 27 |
| 28 Electrocardiography                       | EKG  | 78                        | 2.1  | //// | 0.0  | 0.0 | 0.0 | //// | 2.1  | 28 |
| 29 Interventional Radiology / Cardiovascular | IRC  | 0                         | 0.0  | //// | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 29 |
| 30 Radiology-Diagnostic                      | RAD  | 1,016                     | 26.8 | //// | 0.0  | 0.1 | 1.1 | 40.0 | 67.9 | 30 |
| 31 CT Scanner                                | CAT  | 469                       | 12.4 | //// | 0.0  | 0.1 | 1.0 | 70.8 | 84.3 | 31 |
| 32 Radiology-Therapeutic                     | RAT  | 0                         | 0.0  | //// | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 32 |
| 33 Nuclear Medicine                          | NUC  | 0                         | 0.0  | //// | 0.0  | 0.0 | 0.0 | 0.0  | 0.0  | 33 |

DISTRIBUTION OF CAPITAL FACILITIES ALLOWANCE

H3 B

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

| DISTRIBUTION |                                       | Col. 1<br>ADJ. SQUARE<br>FOOTAGE<br>BASIS | Col. 2  | Col. 3  | Col. 4  | Col. 5 | Col. 6    | Col. 7 | Col. 8 |     |    |
|--------------|---------------------------------------|---|---------|---------|---------|--------|-----------|--------|--------|-----|----|
|              |                                       |   | GENERAL | DIETARY | LAUNDRY | COMM.  | DATA PROC | DEPART | TOTAL  |     |    |
| 34           | Respiratory Therapy                   | RES                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 34  |    |
| 35           | Pulmonary Function Testing            | PUL                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 35  |    |
| 36           | Electroencephalography                | EEG                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 36  |    |
| 37           | Physical Therapy                      | PTH                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 37  |    |
| 38           | Occupational Therapy                  | OTH                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 38  |    |
| 39           | Speech Language Pathology             | STH                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 39  |    |
| 40           | Recreational Therapy                  | REC                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 40  |    |
| 41           | Audiology                             | AUD                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 41  |    |
| 42           | Other Physical Medicine               | OPM                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 42  |    |
| 43           | Renal Dialysis                        | RDL                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 43  |    |
| 44           | Organ Acquisition                     | OA  | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 44  |    |
| 45           | Leukopheresis                         | LEU                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 45  |    |
| 46           | Hyperbaric Chamber                    | HYP                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 46  |    |
| 47           | Free Standing Emergency               | FSE                                       | 12,275  | 323.6   | 0.0     | 0.0    | 1.1       | 11.9   | 0.0    | 47  |    |
| 48           | Magnetic Resonance Imaging            | MRI                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 48  |    |
| 49           | Lithotripsy                           | LIT                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 49  |    |
| 50           | Rehabilitation                        | RHB                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 50  |    |
| 51           | Observation                           | OBV                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 51  |    |
| 52           | Transurethral Microwave Thermotherapy | TMT                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 52  |    |
| 53           | Oncology O/P Clinic                   | OCL                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 53  |    |
| 54           | Transurethral Needle Ablation         | TNA                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 54  |    |
| 55           | Pediatric Step-Down                   | PSD                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 55  |    |
| 56           | 340B Clinic Services                  | CL-340                                    | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 56  |    |
| 57           | 340B Radiology - Therapeutic          | RAT-340                                   | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 57  |    |
| 58           | 340B OR Clinic Services               | ORC-340                                   | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 58  |    |
| 59           | 340B Laboratory Services              | LAB-340                                   | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 59  |    |
| 60           | 340B Drugs                            | CDS-340                                   | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 60  |    |
| 1            | Subtotal                              | ABC                                       | 15,959  | 421     | 0       | 0      | 2         | 17     | 150    | 589 | 1  |
| 61           | Ambulance Services                    | AMB                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 61 |
| 62           | Parking                               | PAR                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 62 |
| 63           | Doctor's Private Office Rent          | DPO                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 63 |
| 64           | Office & Other Rental                 | OOR                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 64 |
| 65           | Retail Operations                     | REO                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 65 |
| 66           | Patients Telephones                   | PTE                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 66 |
| 67           | Cafeteria                             | CAF                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 67 |
| 68           | Day Care Recreation Areas             | DEB                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 68 |
| 69           | Housing                               | HOU                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 69 |
| 70           | Research                              | REG                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 70 |
| 71           | Nursing Education                     | RNS                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 71 |
| 72           | Other Health Profession Education     | OHE                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 72 |
| 73           | Community Health Education            | CHE                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 73 |
| 74           | Post Graduate Medical Ed              | PME                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 74 |
| 75           | Freestanding Clinic Services          | FSC1                                      | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 75 |
| 76           | Home Health Services                  | HHC                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 76 |
| 77           | Outpatient Renal Dialysis             | ORD                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 77 |
| 78           | Skilled Nursing Care                  | ECF                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 78 |
| 79           | Laboratory Non-Patient                | ULB                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 79 |
| 80           | Physicians Part B Services            | UPB                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 80 |
| 81           | Certified Nurse Anesthetists          | CNA                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 81 |
| 82           | Physician Support Services            | PSS                                       | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 82 |
| 83           | TBD                                   | TBA2                                      | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 83 |
| 84           | TBD                                   | TBA3                                      | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 84 |
| 85           | TBD                                   | TBA4                                      | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 85 |
| 86           | TBD                                   | TBA5                                      | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 86 |
| 87           | TBD                                   | TBA6                                      | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 87 |
| 88           | TBD                                   | TBA7                                      | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 88 |
| 89           | TBD                                   | TBA8                                      | 0       | 0.0     | 0.0     | 0.0    | 0.0       | 0.0    | 0.0    | 0.0 | 89 |

|    |                   |     |        |     |   |   |   |    |     |     |    |
|----|-------------------|-----|--------|-----|---|---|---|----|-----|-----|----|
| II | TOTAL DISTRIBUTED | XYZ | 15,959 | 421 | 0 | 0 | 2 | 17 | 150 | 589 | II |
|----|-------------------|-----|--------|-----|---|---|---|----|-----|-----|----|

**OTHER FINANCIAL CONSIDERATIONS**

**G**

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

|                               |   | SOURCE      | FISCAL YEAR |            |            |   |
|-------------------------------|---|-------------|-------------|------------|------------|---|
|                               |   |             | TOTAL       | DIRECT     | Difference |   |
| <b>REVENUES</b>               |   |             | COL. 1      | COL. 2     | COL. 3     |   |
| A                             | Donations, Pledges                      | SCH. GR     | 0.0         | 0.0        | 0.0        | A |
| B                             | Grants                                  | SCH. GR     | 0.0         | 0.0        | 0.0        | B |
| C                             | Investment Income (Interest, Dividends) | SCH. GR     | 0.0         | 0.0        | 0.0        | C |
| D                             | Donated Commodities, Blood, Services    | SCH. GR     | 0.0         | 0.0        | 0.0        | D |
| E                             | PSRO                                    | SCH. GR     | 0.0         | 0.0        | 0.0        | E |
| F                             | Other                                   | SCH. GR     | 0.0         | 0.0        | 0.0        | F |
| G                             | Total Revenues                          | A+B+C+D+E+F | 0.0         | 0.0        | 0.0        | G |
| <b>EXPENSES</b>               |   |             |             |            |            |   |
| H                             | Licenses and Taxes                      | SCH. UA     | 0.4         |            | 0.4        | H |
| I                             | Short Term Interest                     | SCH. UA     | 0.0         |            | 0.0        | I |
| J                             | Other                                   | REC/BUDGET  |             |            |            | J |
| K                             | Total Expenses                          | H + I + J   | 0.4         | 0.0        | 0.4        | K |
| <b>OTHER ADJUSTMENTS</b>      |   |             |             |            |            |   |
| L                             | Aux. Ent & OIP Gains                    | SCH. E, F   | 0.0         | 0.0        | 0.0        | L |
| M                             | Aux. Ent & OIP Losses                   | SCH. E, F   | 16.3        |            | 16.3       | M |
| N                             | Excess Cash Requirements - Bldg & Equip | N/A         |             |            |            | N |
| O                             | Gain on Disposal of Assets              | REC/BUDGET  | 0.0         | 0.0        | 0.0        | O |
| P                             | Loss on Disposal of Assets              | REC/BUDGET  | 0.0         |            | 0.0        | P |
| Q                             | Total Other Adjustments                 | L+M+N+O+P   | 16.3        | 0.0        | 16.3       | Q |
| <b>PERCENTAGE CALCULATION</b> |   |             |             |            |            |   |
| R                             | Net Other Financial Considerations      | G + K + Q   | 16.7        | 0.0        | 16.7       | R |
| S                             | Other Financial Consideration Percent   | R/SCH. M    | //////////  | ////////// | 0.3%       | S |

**THIRD PARTY DIFFERENTIAL**

**PDA**

INSTITUTION NAME: Shore Emergency Center at Queenstown FISCAL YEAR 6/30/2018  
 INSTITUTION NUMBER: 210088

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

**CHARGES, DEDUCTIBLES, CBA**

|    |  | COL 1          | COL 2      | COL 3      |         |    |
|----|--|----------------|------------|------------|---------|----|
| A  | Gross Patient Revenue, HSCRC Regulated                   | Records/Budget | 0.0        | 7,034.9    | 7,034.9 | A  |
| B  | Medicare Revenue, HSCRC Regulated                        | Records/Budget | 0.0        | 1,328.2    | 1,328.2 | B  |
| C  | Medicaid Revenue, HSCRC Regulated                        | Records/Budget | 0.0        | 196.5      | 196.5   | C  |
| D  | Blue Cross Revenue, HSCRC Regulated                      | Records/Budget | 0.0        | 1,107.5    | 1,107.5 | D  |
| E  | MCO Subcontracted Medicare, Medicaid, HSCRC Regulated ** | Records/Budget | 0.0        | 1,967.7    | 1,967.7 | E  |
| F  | Medicare Deductibles Paid by Medicaid, HSCRC Regulated   | Records/Budget | ////////// | ////////// | 0.0     | F  |
| G  | Uncompensated Care, HSCRC Regulated ***                  | Records/Budget | 0.0        | 932.2      | 932.2   | G  |
| G1 | Other Payors Not Eligible for SAAC & Not U.C.            | A-B-C-D-E-G    | 0.0        | 1,502.7    | 1,502.7 | G1 |

**RATIOS, LEVEL III COSTS**

|    |  |                        |            |            |            |    |
|----|--|------------------------|------------|------------|------------|----|
| H  | Ratio of Medicare & Medicaid Charges   | Col 3 (B + C) /Col 3 A | ////////// | ////////// | 0.2167     | H  |
| I  | Ratio of Blue Cross Inpatient Charges  | Col 1 D/Col 3 A        | 0.0000     | ////////// | ////////// | I  |
| II | Ratio of Blue Cross Outpatient Charges | Col 2 D/Col 3 A        | ////////// | 0.1574     | ////////// | II |
| J  | Ratio of HMO Charges                   | Col 3 E/Col 3 A        | ////////// | ////////// | 0.2797     | J  |
| K  | Ratio of Deductibles Paid by Medicaid  | Col 3 F/Col 3 A        | ////////// | ////////// | 0.0000     | K  |
| L  | Ratio of Uncompensated Accounts        | Col 3 G/Col 3 A        | ////////// | ////////// | 0.1325     | L  |
| M  | Ratio of Other Payors Charges          | Col 3 G1/Col 3 A       | ////////// | ////////// | 0.2136     | M  |
| N  | Level III Costs                        | Schedule MA            | ////////// | ////////// | 6,655.7    | N  |

**DIFFERENTIAL CALCULATION**

|   |                               |                 |            |            |         |   |
|---|-------------------------------|-----------------|------------|------------|---------|---|
| O | Gross Revenue HSCRC Regulated | *               | ////////// | ////////// | 8,016.2 | O |
| P | Payor Differential            | 1 - (Col 3 O/N) | ////////// | ////////// | 0.2044  | P |

\* O = N/ (1-.06H + .0225I + .0211+ .06J + .02K + L+.02M) - per HSCRC  
 \*\* Detail on Supplemental Schedule 5  
 \*\*\* See Supplemental Schedule 4 for reconciliation to financial statements

REVENUE CENTER RATE SUMMARY

INSTITUTION NAME: Shore Emergency Center at Queenstown  
 INSTITUTION NUMBER: 210088

FISCAL YEAR 6/30/2018

|  | UNITS OF MEASURE | DIRECT EXPENSES | PAT CARE OVERHEAD EXPENSES | OTHER OVERHEAD EXPENSES | N/A          | PHYSICIAN SUPPORT EXPENSES | RESIDENT INTERN EXPENSES | LEVEL I    | ----- C F A -----      |               | LEVEL II     |                |
|--|------------------|-----------------|----------------------------|-------------------------|--------------|----------------------------|--------------------------|------------|------------------------|---------------|--------------|----------------|
|  |                  |                 |                            |                         |              |                            |                          |            | BLDG & GENRL EQUIPMENT | DEPART-MENTAL |              |                |
| DESCRIPTION                                  | CODE             | COL 1           | COL 2                      | COL 3                   | COL 4        | COL 5                      | COL 6                    | COL 7      | COL 8                  | COL 9         | COL 10       | COL 11         |
| A1 Med/Surg Acute                            | MSG              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 2 Pediatric Acute                            | PED              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 3 Psychiatric Acute                          | PSY              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 4 Obstetrics Acute                           | OBS              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 5 Definitive Observation                     | DEF              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 6 Med/Surg Intensive Care                    | MIS              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 7 Coronary Care                              | CCU              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 8 Pediatric Intensive Care                   | PIC              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 9 Neonatal Intensive Care                    | NEO              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 10 Burn Care                                 | BUR              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 11 Shock/Trauma                              | TRM              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 12 Oncology                                  | ONC              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 13 Newborn Nursery                           | NUR              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 14 Premature Nursery                         | PRE              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 15 Chronic Care                              | CRH              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 16 Emergency Services                        | EMG              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 17 Clinical Services                         | CL               | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 18 Psych. Day & Night Care                   | PDC              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 19 Same Day Surgery                          | SDS              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 20 Labor & Delivery Services                 | DEL              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 21 Operating Room                            | OR               | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 22 Operating Room Clinic                     | ORC              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 23 Anesthesiology                            | ANS              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 24 Laboratory Services                       | LAB              | 378,657         | 665.1                      | 32.8                    | 115.6        | ///////                    | 0.0                      | 0.0        | 813.5                  | 20.5          | 39.7         | 873.7          |
| 25 Electrocardiography                       | EKG              | 7,752           | 7.9                        | 2.9                     | 1.3          | ///////                    | 0.0                      | 0.0        | 12.2                   | 2.1           | 0.0          | 14.3           |
| 26 Interventional Radiology / Cardiovascular | IRC              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 27 Radiology-Diagnostic                      | RAD              | 35,302          | 287.4                      | 38.6                    | 49.7         | ///////                    | 0.0                      | 0.0        | 375.7                  | 28.0          | 40.0         | 443.7          |
| 28 CT Scanner                                | CAT              | 123,984         | 262.9                      | 19.0                    | 45.6         | ///////                    | 0.0                      | 0.0        | 327.6                  | 13.5          | 70.8         | 411.9          |
| 29 Radiology-Therapeutic                     | RAT              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 30 Nuclear Medicine                          | NUC              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 31 Respiratory Therapy                       | RES              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 32 Pulmonary Function Testing                | PUL              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 33 Electroencephalography                    | EEG              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 34 Physical Therapy                          | PTH              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 35 Occupational Therapy                      | OTH              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 36 Speech Language Pathology                 | STH              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 37 Recreational Therapy                      | REC              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 38 Audiology                                 | AUD              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 39 Other Physical Medicine                   | OPM              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 40 Renal Dialysis                            | RDL              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 41 Organ Acquisition                         | OA               | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 42 Leukopheresis                             | LEU              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 43 Hyperbaric Chamber                        | HYP              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 44 Free Standing Emergency                   | FSE              | 112,716         | 3,118.9                    | 509.6                   | 537.9        | ///////                    | 0.0                      | 0.0        | 4,166.3                | 336.5         | 0.0          | 4,502.8        |
| 45 Magnetic Resonance Imaging                | MRI              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 46 Lithotripsy                               | LIT              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 47 Rehabilitation                            | RHB              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 48 Observation                               | OBV              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 49 Ambulance Services-Rebundled              | AMR              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | ///////                  | ///////    | 0.0                    | ///////       | ///////      | 0.0            |
| 50 Transurethral Microwave Thermotherapy     | TMT              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 51 Oncology O/P Clinic                       | OCL              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 52 Transurethral Needle Ablation             | TNA              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 53 Pediatric Step-Down                       | PSD              | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 54 340B Clinic Services                      | CL-340           | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 55 340B Radiology - Therapeutic              | RAT-340          | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 56 340B OR Clinic Services                   | ORC-340          | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 57 340B Laboratory Services                  | LAB-340          | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 58 340B Drugs                                | CDS-340          | 0               | 0.0                        | 0.0                     | 0.0          | ///////                    | 0.0                      | 0.0        | 0.0                    | 0.0           | 0.0          | 0.0            |
| 59 Admission Services                        | ADM              | 0               | ///////                    | 0.0                     | 0.0          | ///////                    | ///////                  | ///////    | 0.0                    | ///////       | ///////      | 0.0            |
| 60 Med/Surg Supplies                         | MSS              | 0               | 98.8                       | 20.3                    | (0.2)        | ///////                    | ///////                  | ///////    | 118.9                  | 19.1          | ///////      | 138.0          |
| 61 Drugs Sold                                | CDS              | 0               | 167.5                      | 75.2                    | 9.3          | ///////                    | ///////                  | ///////    | 252.0                  | 19.3          | ///////      | 271.3          |
| 62   |                  |                 |                            |                         |              | ///////                    |                          |            |                        |               |              |                |
| <b>B TOTAL</b>                               |                  | <b>658,411</b>  | <b>4,608.6</b>             | <b>698.4</b>            | <b>759.2</b> |                            | <b>0.0</b>               | <b>0.0</b> | <b>6,066.2</b>         | <b>439.0</b>  | <b>150.4</b> | <b>6,655.7</b> |



REVENUE CENTER RATE SUMMARY

INSTITUTION NAME:  
INSTITUTION NUMBER:

Shore Emergency Center at Queenstown  
210088

FISCAL YEAR

6/30/2018

|             |   | OFC            |                           | LEVEL III | PAYOR DIFFERENTIAL | LEVEL IV | CROSS SUBSIDY | MISC ADJ | HSCRC ADJ | ADJUST LEVEL IV | AVERAGE RATES |
|-------------|---|----------------|---------------------------|-----------|--------------------|----------|---------------|----------|-----------|-----------------|---------------|
|             |   | Direct offsets | (Discontinued) Difference |           |                    |          |               |          |           |                 |               |
| DESCRIPTION | CODE                                      | COL 1          | COL 2                     | COL 3     | COL 4              | COL 5    | COL 6         | COL 7    | COL 8     | COL 9           | COL 10        |
| A1          | Med/Surg Acute                            | MSG            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 2           | Pediatric Acute                           | PED            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 3           | Psychiatric Acute                         | PSY            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 4           | Obstetrics Acute                          | OBS            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 5           | Definitive Observation                    | DEF            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 6           | Med/Surg Intensive Care                   | MIS            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 7           | Coronary Care                             | CCU            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 8           | Pediatric Intensive Care                  | PIC            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 9           | Neonatal Intensive Care                   | NEO            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 10          | Burn Care                                 | BUR            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 11          | Shock Trauma                              | TRM            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 12          | Oncology                                  | ONC            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 13          | Newborn Nursery                           | NUR            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 14          | Premature Nursery                         | PRE            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 15          | Chronic Care                              | CRH            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 16          | Emergency Services                        | EMG            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 17          | Clinical Services                         | CL             | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 18          | Psych, Day & Night Care                   | PDC            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 19          | Same Day Surgery                          | SDS            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 20          | Labor & Delivery Services                 | DEL            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 21          | Operating Room                            | OR             | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 22          | Operating Room Clinic                     | ORC            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 23          | Anesthesiology                            | ANS            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 24          | Laboratory Services                       | LAB            | 0.0                       | 873.7     | 178.6              | 1,052.3  |               |          |           | 1,052.3         | 2,7792        |
| 25          | Electrocardiography                       | EKG            | 0.0                       | 14.3      | 2.9                | 17.2     |               |          |           | 17.2            | 2,2138        |
| 26          | Interventional Radiology / Cardiovascular | IRC            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 27          | Radiology-Diagnostic                      | RAD            | 0.0                       | 443.7     | 90.7               | 534.4    |               |          |           | 534.4           | 15,1367       |
| 28          | CT Scanner                                | CAT            | 0.0                       | 411.9     | 84.2               | 496.1    |               |          |           | 496.1           | 4,0011        |
| 29          | Radiology-Therapeutic                     | RAT            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 30          | Nuclear Medicine                          | NUC            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 31          | Respiratory Therapy                       | RES            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 32          | Pulmonary Function Testing                | PUL            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 33          | Electroencephalography                    | EEG            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 34          | Physical Therapy                          | PTH            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 35          | Occupational Therapy                      | OTH            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 36          | Speech Language Pathology                 | STH            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 37          | Recreational Therapy                      | REC            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 38          | Audiology                                 | AUD            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 39          | Other Physical Medicine                   | OPM            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 40          | Renal Dialysis                            | RDL            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 41          | Organ Acquisition                         | OA             | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 42          | Leukopheresis                             | LEU            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 43          | Hyperbaric Chamber                        | HYP            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 44          | Free Standing Emergency                   | FSE            | 0.0                       | 4,502.8   | 920.4              | 5,423.2  |               |          |           | 5,423.2         | 48,1142       |
| 45          | Magnetic Resonance Imaging                | MRI            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 46          | Lithotripsy                               | LIT            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 47          | Rehabilitation                            | RHB            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 48          | Observation                               | OBV            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 49          | Ambulance Services-Rebundled              | AMR            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 50          | Transurethral Microwave Thermotherapy     | TMT            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 51          | Oncology O/P Clinic                       | OCL            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 52          | Transurethral Needle Ablation             | TNA            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 53          | Pediatric Step-Down                       | PSD            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 54          | 340B Clinic Services                      | CL-340         | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 55          | 340B Radiology - Therapeutic              | RAT-340        | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 56          | 340B OR Clinic Services                   | ORC-340        | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 57          | 340B Laboratory Services                  | LAB-340        | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 58          | 340B Drugs                                | CDS-340        | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 59          | Admission Services                        | ADM            | 0.0                       | 0.0       | 0.0                | 0.0      |               |          |           | 0.0             | 0.0000        |
| 60          | Med/Surg Supplies                         | MSS            | 0.0                       | 138.0     | 28.2               | 166.2    |               |          |           | 166.2           | 0.0000        |
| 61          | Drugs Sold                                | CDS            | 0.0                       | 271.3     | 55.5               | 326.8    |               |          |           | 326.8           | 0.0000        |
| 62          |   |                | 0.0                       |           |                    |          |               |          |           |                 |               |
| B           | TOTAL                                     |                | 0.0                       | 6,655.7   | 1,360.5            | 8,016.2  | 0.0           | 0.0      | 0.0       | 8,016.2         | //////////    |

**OVERHEAD EXPENSE SUMMARY**

**OES**

INSTITUTION NAME: Shore Emergency Center at Queenstown FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

| EXPENSES |                              | TOTAL   | DISTRIBUTE TO:                        |                               |  |   |
|----------|------------------------------|---------|---------------------------------------|-------------------------------|--|---|
|          |                              |         | Physician<br>Part B Centers<br>Sch P2 | Data<br>Processing<br>Sch DP1 | General<br>Service Centers<br>Sch C1 - C14 |   |
| A        | Dietary Services             | 0.0     | 0.0                                   |                               | 0.0  | A |
| B        | Laundry & Linen              | 66.1    | 0.0                                   |                               | 66.1                                       | B |
| C        | Social Services              | 0.0     | 0.0                                   |                               | 0.0  | C |
| D        | Purchasing & Stores          | 21.3    | 0.0                                   |                               | 21.3                                       | D |
| E        | Plant Operations             | 429.5   | 0.0                                   |                               | 429.5                                      | E |
| F        | Housekeeping                 | 99.2    | 0.0                                   |                               | 99.2                                       | F |
| G        | Central Services & Supply    | 0.0     | 0.0                                   |                               | 0.0  | G |
| H        | Pharmacy                     | 51.9    | 0.0                                   |                               | 51.9                                       | H |
| I        | General Accounting           | 99.3    | 0.0                                   |                               | 99.3                                       | I |
| J        | Patient Accounts             | 278.9   | 0.0                                   |                               | 278.9                                      | J |
| K        | Hospital Administration      | 272.3   | 0.0                                   |                               | 272.3                                      | K |
| L        | Medical Records              | 38.7    | 0.0                                   |                               | 38.7                                       | L |
| M        | Medical Staff Administration | 59.2    | 0.0                                   |                               | 59.2                                       | M |
| N        | Nursing Administration       | 43.0    | 0.0                                   |                               | 43.0                                       | N |
| O        | Data Processing              | 286.8   | 0.0                                   | 286.8                         |  | O |
| P        | Organ Acquisition Overhead   | 0.0     |                                       |                               | 0.0  | P |
| Q        | Totals                       | 1,746.2 | 0.0                                   | 286.8                         | 1,459.4                                    | Q |

**ANNUAL COST SURVEY**

**ACS**

INSTITUTION NAME: Shore Emergency Center & FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210088

COL 1 COL 2

|     | CATEGORY                                    | COSTS   | PERCENT |     |
|-----|---|---------|---------|-----|
| A   | Salaries & Wages                            | 2,551.1 | 38.33%  | A   |
| B   | Fringe Benefits                             | 721.1   | 10.83%  | B   |
| C   | Depreciation & Amortization                 | 468.1   | 7.03%   | C   |
| C01 | Operating Leases                            | 0.9     | 0.01%   | C01 |
| D   | Interest Expense                            | 120.4   | 1.81%   | D   |
| E   | Medical & Surgical Supplies                 | 119.1   | 1.79%   | E   |
| F   | IV Solutions and Pharmacy                   | 195.3   | 2.93%   | F   |
| G   | Laundry, Linen, Uniforms                    | 66.1    | 0.99%   | G   |
| H   | Films & Solutions                           | 28.0    | 0.42%   | H   |
| I   | Blood, Plasmanate, Albumin                  | 0.0     | 0.00%   | I   |
| J   | Contracted Services                         | 808.2   | 12.14%  | J   |
| K   | Professional Fees                           | 1,441.3 | 21.65%  | K   |
| L   | Agency Nurses                               | 5.7     | 0.09%   | L   |
| M   | Malpractice Insurance                       | 23.5    | 0.35%   | M   |
| N   | All Other Insurance                         | (120.2) | -1.81%  | N   |
| O   | Telephone                                   | 6.5     | 0.10%   | O   |
| P   | Utilities & Water                           | 2.2     | 0.03%   | P   |
| Q   | Food  | 74.2    | 1.11%   | Q   |
| R   | Printing, Office Supplies, Copying, Postage | 27.5    | 0.41%   | R   |
| S   | Chemical, Solutions, Lubrication, Gases     | 108.1   | 1.62%   | S   |
| T   | Other (Detail over 20% of supply cost)      | 8.8     | 0.13%   | T   |
| U   | Total                                       | 6,656.0 | 100.00% | U   |

UNREGULATED SERVICES

Not Applicable



UR-8

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PHYSICIAN SUPPORT SERVICES

UR-9

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UR-10

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UR-15

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TBD

TRANSACTIONS WITH RELATED ENTITIES

TRE

INSTITUTION NAME: Shore Emergency Center at Queenstown

BASE YEAR 6/30/2018

INSTITUTION NUMBER: 210088

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

| No. | RELATED ENTITY | VALUE OF ASSET OR SERVICE PROVIDED TO THE HOSPITAL | VALUE OF ASSET OR SERVICE PROVIDED BY THE HOSPITAL | CATEGORY CODE | DESCRIPTION OF TRANSACTION            |
|-----|----------------|--|--|---------------|---------------------------------------|
| 1   | UMMS           | 269,962  |  | B             | INST OTHER CRP ALLO/RECV: IT          |
| 2   | UMMS           | 110,047  |  | B             | INST OTHER CRP ALLO/RECV: FACLTY CBO  |
| 3   | UMMS           | 82,655   |  | B             | INST OTHER CRP ALLO/RECV: FINANCE     |
| 4   | UMMS           | 68,620   |  | B             | INST OTHER CRP ALLO/RECV: HR          |
| 5   | UMMS           | 62,982   |  | B             | INST OTHER CRP ALLO/RECV: ENGIN       |
| 6   | UMMS           | 51,620   |  | B             | INST OTHER CRP ALLO/RECV: CRP OFFICE  |
| 7   | UMMS           | 43,710   |  | B             | INST OTHER PHYS/UMAB: SUPPORT         |
| 8   | UMMS           | 35,871   |  | B             | INST OTHER CRP ALLO/RECV: MKTING      |
| 9   | UMMS           | 23,679   |  | B             | INST OTHER CRP ALLO/RECV: DEPRECIATN  |
| 10  | UMMS           | 18,717   |  | B             | INST OTHER CRP ALLO/RECV: SUPP CHAIN  |
| 11  | UMMS           | 17,771   |  | B             | INST OTHER CRP ALLO/RECV: GBR         |
| 12  | UMMS           | 16,792   |  | B             | INST OTHER CRP ALLO/RECV: DATA DRIV   |
| 13  | UMMS           | 14,222   |  | B             | INST OTHER CRP ALLO/RECV: PROP MGMT   |
| 14  | UMMS           | 10,110   |  | B             | INST OTHER CRP ALLO/RECV: LEGAL       |
| 15  | UMMS           | 6,746  |  | B             | INST OTHER CRP ALLO/RECV: CLIN PREF   |
| 16  | UMMS           | 6,168  |  | B             | INST OTHER CRP ALLO/RECV: TELEMED     |
| 17  | UMMS           | 6,097  |  | B             | INST OTHER CRP ALLO/RECV: COMPLIANCE  |
| 18  | UMMS           | 5,733  |  | B             | INST OTHER CRP ALLO/RECV: OPS COUNCIL |
| 19  | UMMS           | 4,498  |  | B             | INST OTHER CRP ALLO/RECV: TELE-SITTER |
| 20  | UMMS           | 3,149  |  | B             | INST OTHER CRP ALLO/RECV: AUDIT       |

**REPORTING OF REGULATORY ADJUSTMENTS  
FOR TPR HOSPITALS**

INSTITUTION NAME: Shore Emergency Center at Queenstown IAS Effective Date 7/1/2017  
 INSTITUTION NUMBER: 210088 FISCAL YEAR 6/30/2018

| <b>PART I ACTUAL REVENUE</b> |                              |          |              | Col. 4     | Col. 5     |
|------------------------------|------------------------------|----------|--------------|------------|------------|
| A1                           | Prior Period                 | 7/1/2016 | to 6/30/2017 | 6,432,806  | ////////// |
| B1                           | Subsequent Period            | 7/1/2017 | to 6/30/2018 | 7,034,873  | ////////// |
| C01                          | Total Actual Revenue A1 + B1 |          |              | ////////// | 13,467,679 |

| <b>PART II CAPPED REVENUE</b> |                      | Col. 1         | Col. 2                | Col. 3           | Col. 4         | Col. 5     |
|-------------------------------|----------------------|----------------|-----------------------|------------------|----------------|------------|
|                               |                      | Effective Date | # of Months Effective | Budgeted Revenue | Capped Revenue |            |
| A2                            | Prior Period         | 7/1/2016       | 12                    | 6,530,220        | 6,530,220      | ////////// |
| B2                            | Subsequent Period    | 7/1/2017       | 12                    | 6,681,240        | 6,681,240      | ////////// |
| C02                           | Total Capped Revenue |                |                       |                  | //////////     | 13,211,460 |

| <b>PART III ACTUAL REVENUE OVER (UNDER) CAPPED REVENUE</b> |               |  |  | Col. 4     | Col. 5  |
|--|---------------|--|--|------------|---------|
| A3   | Total C1 - C2 |  |  | ////////// | 256,219 |





**SUPPLEMENTAL SCHEDULE 1**

**Shore Emergency Center at Queenstown**

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

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

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

|  |        |                        |
|--|--------|------------------------|
| Ambulance Services                       | -      | E01                    |
| Parking                                  | -      | E02                    |
| Doctor's Private Office Rent             | -      | E03                    |
| Office & Other Rental                    | -      | E04                    |
| Retail Operations                        | -      | E05                    |
| Patients Telephones                      | -      | E06                    |
| Cafeteria                                | -      | E07                    |
| Day Care Recreation Areas                | -      | E08                    |
| Housing                                  | -      | E09                    |
| Research                                 | -      | F01                    |
| Nursing Education                        | -      | F02                    |
| Other Health Profession Education        | -      | F03                    |
| Community Health Education               | -      | F04                    |
| Freestanding Clinic Services             | -      | UR01                   |
| Home Health Services                     | -      | UR02                   |
| Outpatient Renal Dialysis                | -      | UR03                   |
| Skilled Nursing Care                     | -      | UR04                   |
| Laboratory Non-Patient                   | -      | UR05                   |
| Physicians Part B Services               | -      | UR06                   |
| Certified Nurse Anesthetists             | -      | UR07                   |
| Physician Support Services               | -      | UR08                   |
| TBD                                      | -      | UR09                   |
| TBD                                      | -      | UR10                   |
| TBD                                      | -      | UR11                   |
| TBD                                      | -      | UR12                   |
| TBD                                      | -      | UR13                   |
| TBD                                      | -      | UR14                   |
| TBD                                      | -      | UR15                   |
| Investment Income                        | (21.0) | G / GR                 |
| Other:                                   |        | G / GR                 |
| Other:                                   |        | G / GR                 |
| Other:                                   |        | G / GR                 |
| Other:                                   |        | G / GR                 |
| Other:                                   |        | G / GR                 |
| Total - RE Line, Col 2., Line M + Line U |        | <u>(21.0)</u> Check -> |
|  |        | -                      |

**SUPPLEMENTAL SCHEDULE 1**

**Shore Emergency Center at Queenstown**

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

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

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

|                                   |      |        |
|-----------------------------------|------|--------|
| Ambulance Services                | -    | E01    |
| Parking                           | -    | E02    |
| Doctor's Private Office Rent      | -    | E03    |
| Office & Other Rental             | -    | E04    |
| Retail Operations                 | -    | E05    |
| Patients Telephones               | -    | E06    |
| Cafeteria                         | -    | E07    |
| Day Care Recreation Areas         | -    | E08    |
| Housing                           | -    | E09    |
| Research                          | -    | F01    |
| Nursing Education                 | 16.3 | F02    |
| Other Health Profession Education | -    | F03    |
| Community Health Education        | -    | F04    |
| Freestanding Clinic Services      | -    | UR01   |
| Home Health Services              | -    | UR02   |
| Outpatient Renal Dialysis         | -    | UR03   |
| Skilled Nursing Care              | -    | UR04   |
| Laboratory Non-Patient            | -    | UR05   |
| Physicians Part B Services        | -    | UR06   |
| Certified Nurse Anesthetists      | -    | UR07   |
| Physician Support Services        | -    | UR08   |
| TBD                               | -    | UR09   |
| TBD                               | -    | UR10   |
| TBD                               | -    | UR11   |
| TBD                               | -    | UR12   |
| TBD                               | -    | UR13   |
| TBD                               | -    | UR14   |
| TBD                               | -    | UR15   |
| Non Operating Expenses            | -    | G / GR |
| Other:                            | -    | G / GR |
| Other:                            | -    | G / GR |
| Other:                            | -    | G / GR |
| Other:                            | -    | G / GR |
| Other:                            | -    | G / GR |

Total - RE Line, Col 2., Line S + Line V 16.3 Check ->

**SUPPLEMENTAL SCHEDULE 2**

**Shore Emergency Center at Queenstown**

**Reconciliation of Depreciation & Lease / Rentals**

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

|                                 | <u>Depreciation</u> | <u>Leases /<br/>Rentals</u> | <u>Total</u> |
|---------------------------------|---------------------|-----------------------------|--------------|
| UA Schedule - Line A            | 468.1               | 0.9                         | 469.0        |
| Allocation of E & UR Schedules: |                     |                             |              |
| E01                             | -                   | -                           | -            |
| E02                             | -                   | -                           | -            |
| E03                             | -                   | -                           | -            |
| E04                             | -                   | -                           | -            |
| E05                             | -                   | -                           | -            |
| E06                             | -                   | -                           | -            |
| E07                             | -                   | -                           | -            |
| E08                             | -                   | -                           | -            |
| E09                             | -                   | -                           | -            |
| UR01                            | -                   | -                           | -            |
| UR02                            | -                   | -                           | -            |
| UR03                            | -                   | -                           | -            |
| UR04                            | -                   | -                           | -            |
| UR05                            | -                   | -                           | -            |
| UR06                            | -                   | -                           | -            |
| UR07                            | -                   | -                           | -            |
| UR08                            | -                   | -                           | -            |
| UR09                            | -                   | -                           | -            |
| UR10                            | -                   | -                           | -            |
| UR11                            | -                   | -                           | -            |
| UR12                            | -                   | -                           | -            |
| UR13                            | -                   | -                           | -            |
| UR14                            | -                   | -                           | -            |
| UR15                            | -                   | -                           | -            |
| RE Schedule - Line Q            | <u>468.1</u>        | <u>0.9</u>                  | <u>469.0</u> |

**SUPPLEMENTAL SCHEDULE 3**

**Shore Emergency Center at Queenstown**

**Reconciliation of UCC**

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

**Audited Financial Statements:**

|                                  |              |
|----------------------------------|--------------|
| Bad Debts                        | 845.5        |
| Charity Care                     | 86.7         |
| Uncompensated Care per Statement | <u>932.2</u> |

**Trial Balance:**

|                                      |              |           |         |      |  |       |          |           |
|--------------------------------------|--------------|-----------|---------|------|--|-------|----------|-----------|
| Bad Debt Write-offs                  | 1,049.6      | 728,172   |         |      |  | 728   | Bad Debt | 1,049,587 |
| Charity Write-offs                   | 86.7         | (102,538) |         |      |  | 79    | CC       | 86,714    |
| Change in Balance Sheet Reserve      | -            | 78,702    |         |      |  | (0)   | Recovery | (290,825) |
| Bad Debt Recoveries                  | (290.8)      | 704,335   | 932,189 | 1.32 |  | (103) | TOTAL    | 845,475   |
| Other                                | 86.7         |           |         |      |  |       | BD LESS  | 758,762   |
| Uncompensated Care per Trial Balance | <u>932.2</u> |           |         |      |  |       |          |           |

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

|  |              |
|--|--------------|
| Uncompensated Care - Schedule PDA                      | 932.2        |
| Unregulated Charity & Bad Debts                        | -            |
| Medicaid Day Limit UCC included in contractuals on F/S | <u>-</u>     |
| Uncompensated Care Per Report                          | <u>932.2</u> |



**SUPPLEMENTAL SCHEDULE 5**

**Shore Emergency Center at Queenstown**

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

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

Income Statement

|  |   |    |                  |
|--|---|----|------------------|
| RE Line T  | Excess (Deficit) Operating Rev. Over Operating Expenses | \$ | (1,285.1)        |
| RE Line U Detailed Non-Operating: Income / (Expense) |   |    |                  |
| U1   | Contributions (Unrestricted)                            | \$ | 0.0              |
| U2   | Interest & Investment Income                            |    | 6.7              |
| U3   | Investment - Gains / (Losses) - Realized                |    |                  |
| U4   | Investment - Gains / (Losses) - Unrealized              |    |                  |
| U5   | Swap Agreements - Gains / (Losses) - Realized           |    | (23.6)           |
| V  | Other (Specify)   |    | (4.1)            |
| RE Line W  | Excess Profit / (Loss)                                  |    | <u>(1,306.1)</u> |

Other Significant Financial Information

|    |  |    |              |
|----|--|----|--------------|
| CC | Swap Agreements - Gains / (Losses) - Unrealized  | \$ | (8.5)        |
| DD | Collateral Received / (Posted) - Swap Agreements |    |              |
| EE | Retirement of Debt - Gains / (Losses)            |    |              |
| FF | Pension Adjustments - Defined Benefit Plans      |    |              |
| GG | Other (Specify)                                  |    | 4.4          |
| HH | Total  | \$ | <u>(4.1)</u> |
|    | Other non-operating income/expense               |    |              |

## SUPPLEMENTAL SCHEDULE 6

### Shore Emergency Center at Queenstown

#### Debt Collection/Financial Assistance Report

For The Fiscal Year Ended June 30, 2018

DCFA records do not reflect a separate QAEC - combined with SMC E

#### 1. Collection Agency Name

- a. Bloom & Associates, P.A.
- b. MAMI
- c. Receivables Outsourcing, Inc.
- d. ProCo LLC
- e.
- f.
- g.
- h.

#### 2. Number of Liens

- i. -

#### 3. Number of extended payment plans

- j. 47

#### FINANCIAL ASSISTANCE

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

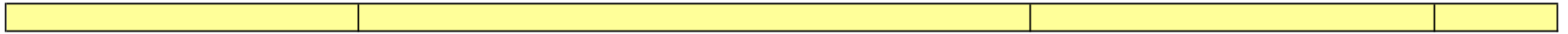
- k. 550

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

- l. 448







## SUPPLEMENTAL SCHEDULE 8

### Gross Patient Revenue Reconciliation

For The Fiscal Year Ended June 30, 2018

Institution Name: Shore Emergency Center at Queenstown

Institution Number: 210088

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

#### Section I

#### TOTAL GROSS PATIENT REVENUE

| Line # |                             | Col 1<br>Inpatient | Col 2<br>Outpatient | Col 3<br>Total |
|--------|-----------------------------|--------------------|---------------------|----------------|
| 1      | Total In-State Revenue      | \$ -               | \$ 6,788.510        | \$ 6,789       |
| 2      | Total Out-State Revenue     | \$ -               | \$ 246.363          | \$ 246         |
| 3      | Total Gross Patient Revenue | \$ -               | \$ 7,034.8730       | 7,034.8730     |

#### Section II

#### TOTAL MEDICARE REVENUE

|   | Col 1<br>In-State<br>I/P Revenue | Col 2<br>Out-State<br>I/P Revenue | Col 3<br>In-State<br>O/P Revenue | Col 4<br>Out-State<br>O/P Revenue | Col 5<br>Total<br>Revenue |          |
|---|----------------------------------|-----------------------------------|----------------------------------|-----------------------------------|---------------------------|----------|
| 4 | Medicare FFS Revenue             | \$ -                              | \$ -                             | \$ 1,375                          | \$ 51                     | \$ 1,426 |
| 5 | Medicare Non-FFS Revenue         | \$ -                              | \$ -                             | \$ 90                             | \$ 7                      | \$ 97    |
| 6 | Total Medicare Revenue           | \$ -                              | \$ -                             | \$ 1,465                          | \$ 58                     | \$ 1,523 |

**SUPPLEMENTAL SCHEDULE 9**

**UR6-A**

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

INSTITUTION NAME: Shore Emergency Center at Queenstown

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER: 210088

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

**Instructions:**

1) Enter the appropriate code and description for each physician type at the hospital, with separate lines for hospital vs. non-hospital based physicians.

*A directory of codes and description can be found below.*

If your hospital has both hospital and non-hospital based physicians in the same category, use one line for hospital based and a separate line for non-hospital based physicians.

2) Enter expenses and revenues in thousands, rounded to one decimal place.

3) Indicate "Yes" or "No" in the "Hospital Based" column for the line in question.

For the purposes of this report, only House Staff, Pathologists, Radiologists, and Anesthesiologists can be considered "Hospital Based."

4) Enter the FTEs for each line. FTEs should be rounded to one decimal place.

5) Verify that the data entered matches Schedule UR6 using the check at the bottom of this schedule.

| COL. 1       | COL. 2                       | COL. 3  | COL. 4                | COL. 5                | COL. 6         | COL. 7                | COL. 8      |
|--------------|------------------------------|---|-----------------------|-----------------------|----------------|-----------------------|-------------|
| <u>Code</u>  | <u>Physician Description</u> | <u>Wages, Salaries, &amp; Fringe Benefits</u> | <u>Other Expenses</u> | <u>Total Expenses</u> | <u>Revenue</u> | <u>Hospital Based</u> | <u>FTEs</u> |
|              |                              |   |                       | \$ -                  |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
|              |                              |   |                       | -                     |                |                       |             |
| <b>Total</b> |                              | \$ -  | \$ -                  | \$ -                  | \$ -           | <b>Combined</b>       | -           |