

PENINSULA REGIONAL MEDICAL CENTER

**HEALTH SERVICES COST REVIEW
COMMISSION**

RATE REVIEW SYSTEM

FOR THE FISCAL YEAR ENDED JUNE 30, 2018

INPATIENTS AND PATIENT DAYS

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER: 210019

			COL. 1	COL. 2	COL. 3	COL. 4	COL. 5	COL. 6
REPORTING SCHEDULE		CENTER	ADMISSIONS	PATIENT DAYS	INTRA HOSPITAL TRANSFERS IN	LENGTH OF STAY	AVERAGE LICENSED BEDS	% OCCUPANCY
			RECORDS	RECORDS	RECORDS	COL 2 / (COL 1 + COL 3)	RECORDS	COL 2 / COL 5 * 365
D01	MSG	Med/Surg Acute	13,649	59,187	0	4.3	225	0.721
D02	PED	Pediatric Acute	436	1,031	0	2.4	8	0.353
D03	PSY	Psychiatric Acute	692	3,895	0	5.6	12	0.889
D04	OBS	Obstetrics Acute	1,954	4,789	0	2.5	20	0.656
D05	DEF	Definitive Observation	0	0	0	0.0	0	0.000
D06	MIS	Med/Surg Intensive Care	492	5,782	2,222	2.1	24	0.660
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			17,223	74,684	2,222	3.8	289	0.708
D14	NUR	Newborn Nursery	1,922	5,355	0	2.8	0	
D15	PRE	Premature Nursery	0	0	0	0.0	0	
TOTAL			19,145	80,039	2,222	3.7	289	0.759

OUTPATIENT VISITS

V2

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210019

			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	12,928	76,311	89,239	184,583	655,252	839,835
D19	CL	Clinical Services	0	35,910	35,910	0	341,645	341,645
D20	PDC	Psych. Day & Night Care	0	2,192	2,192			
D22	SDS	Same Day Surgery	0	9,025	9,025			
D50	FSE	Free Standing Emergency	0	0	0			
D55	OBV	Observation	1,436	3,044	4,480	25,566	87,236	112,802
D58	OCL	Oncology O/P Clinic	0	0	0	0	0	0
D83	CL-340	340B Clinic Services				0	0	0
TOTAL			14,364	126,482	140,846	210,149	1,084,133	1,294,282

ANCILLARY SERVICE UNITS

V3

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210019

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

REPORTING SCHEDULE	CENTER	UNIT OF MEASURE	INPATIENT VOLUME	OUTPATIENT VOLUME	TOTAL VOLUME
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RECORDS RECORDS COL 1 + COL 2

D23	DEL	Labor & Delivery Services	MD RVUs	69,923	10,691	80,614
D24	OR	Operating Room	Minutes	677,944	568,146	1,246,090
D24A	ORC	Operating Room Clinic	Minutes	0	120,282	120,282
D25	ANS	Anesthesiology	Minutes	738,331	591,952	1,330,283
D28	LAB	Laboratory Services	MD RVUs	8,883,829	6,454,241	15,338,070
D30	EKG	Electrocardiography	1974 California RV	391,782	372,885	764,667
D31	IRC	Interventional Radiology / Cardiovascular	MD RVUs	89,451	147,466	236,917
D32	RAD	Radiology-Diagnostic	HSCRC RVUs	297,434	483,826	781,260
D33	CAT	CT Scanner	HSCRC RVUs	474,795	878,429	1,353,224
D34	RAT	Radiology-Therapeutic	MD RVUs	53,960	1,363,364	1,417,324
D35	NUC	Nuclear Medicine	HSCRC RVUs	57,790	185,453	243,243
D36	RES	Respiratory Therapy	MD RVUs	3,174,699	345,473	3,520,172
D37	PUL	Pulmonary Function Testing	MD RVUs	1,232	237,560	238,792
D38	EEG	Electroencephalography	1974 California RV	74,022	346,278	420,300
D39	PTH	Physical Therapy	MD RVUs	295,679	53,039	348,718
D40	OTH	Occupational Therapy	MD RVUs	108,853	14,411	123,264
D41	STH	Speech Language Pathology	MD RVUs	62,895	14,307	77,202
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	1,270	1,270
D51	MRI	Magnetic Resonance Imaging	HSCRC RVUs	138,386	158,626	297,012
D53	LIT	Lithotripsy	# of Procedures	3	167	170
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: Peninsula Regional Medical Center FISCAL YEAR 6/30/2018
 INSTITUTION NUMBER: 210019

EQUIVALENT INPATIENT DAYS (EIPDs)	SOURCE	FISCAL YEAR
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INPATIENT DATA - BASE YEAR

COL. 1

COL. 2

A	GROSS INPATIENT REVENUE	RECORDS, BUDGET	254,809.4	A
B	INPATIENT GRANT REVENUE	RECORDS, BUDGET	0.0	B
C	TOTAL INPATIENT REVENUE *	A + B	254,809.4	C
D	TOTAL INPATIENT DAYS (IPDs) (EXCLUDING NURSERY)	SCHD V 1 D	74,684	D
E	INPATIENT UNIT REVENUE	C / D	3,41183	E
F	GROSS OUTPATIENT REVENUE	RECORDS, BUDGET	195,527.1	F
G	OUTPATIENT GRANT REVENUE	RECORDS, BUDGET	0.0	G
H	TOTAL OUTPATIENT REVENUE *	F + G	195,527.1	H
I	TOTAL OUTPATIENT VISITS	SCH V 2 B	131,821	I
J	OUTPATIENT UNIT REVENUE	H / I	1,48328	J
K	INPATIENT - OUTPATIENT UNIT REVENUE RATIO	E / J	2.30019	K
L	INPATIENT EQUIVALENT OF OUTPATIENT VISITS	I / K	57,309	L
M	EQUIVALENT INPATIENT DAYS (EIPDs)	D + L	131,993	M

EQUIVALENT INPATIENT ADMISSIONS (EIPAs)	SOURCE	FISCAL YEAR
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N	TOTAL INPATIENT ADMISSIONS	SCH V 1 D	17,223	N
O	INPATIENT UNIT REVENUE	C / N	14,79472	O
P	OUTPATIENT UNIT REVENUE	H / I	1,48328	P
Q	INPATIENT - OUTPATIENT UNIT REVENUE RATIO	O / P	9.97433	Q
R	INPATIENT EQUIVALENT OF OUTPATIENT VISITS	I / Q	13,216	R
S	EQUIVALENT INPATIENT ADMISSIONS (EIPAs)	N + R	30,439	U

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: Peninsula Regional Medical Center

INSTITUTION NUMBER: 210019

FISCAL YEAR: 6/30/2018

Allocation of Cafeteria / Parking Expense

		COL 1	COL 2
LOSS PER FTE		SOURCE	TOTAL EXPENSES
A	GAIN (LOSS) TO BE ALLOCATED AS FRINGE	SCH. E2,E7,E8, E9	967.6
B	NUMBER OF FTE'S	RECORDS	2,139.7
B1	LOSS PER FTE	A / B	0.45221

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	9,686.1	10,566.3	20,252.4
2	DONATED SERVICES & COMMODITIES	RECORDS	0.0	0.0	0.0
3	FISCAL YEAR ADJUSTED EXPENSES	CI + C2	9,686.1	10,566.3	20,252.4

///	DISTRIBUTION OF LOSS PER FTE	LOOK UP	SCHED	CODE	CAFETERIA, PARKING, ETC		DATA PROCESSING						COL 8 TOTAL ALLOCATED EXPENSE
					COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7		
					NO. OF FTE'S	C x D1	FTE'S ALLOCATED	BASIS	WAGES, SALARIES, & F. BENEFIT	OTHER EXPENSES	DP ALLOCATION		
1	DIETARY SERVICES	C01	C01	DTY	42.4	\$ 19.2	1.2	1.45%	\$ 140.4	\$ 153.2	\$ 293.7	312.8	
2	LAUNDRY & LINEN	C02	C02	LL	0.0	0.0	0.0	0.00%	-	-	-	-	
3	SOCIAL SERVICES	C03	C03	SSS	23.4	11.5	0.0	0.00%	-	-	-	11.5	
4	PURCHASING & STORES	C04	C04	FUR	31.9	14.4	2.6	3.18%	308.0	336.0	644.0	658.4	
5	PLANT OPERATIONS	C05	C05	POP	51.4	23.3	0.8	1.02%	98.8	107.8	206.6	229.8	
6	HOUSEKEEPING	C06	C06	HKP	80.5	36.4	0.3	0.38%	36.8	40.2	77.0	113.4	
7	CENTRAL SERVICES & SUPPLY	C07	C07	CSS	18.1	8.2	0.0	0.00%	-	-	-	8.2	
8	PHARMACY	C08	C08	PHM	46.9	21.2	3.0	3.78%	366.1	399.4	765.5	786.8	
9	GENERAL ACCOUNTING	C09	C09	FIS	17.7	8.0	2.0	2.47%	239.2	261.0	500.2	508.2	
10	PATIENT ACCOUNTS	C10	C10	PAC	86.8	39.3	6.7	8.36%	809.8	883.3	1,693.1	1,732.4	
11	HOSPITAL ADMINISTRATION	C11	C11	MGMT	110.2	49.8	10.1	12.59%	1,219.5	1,330.3	2,549.8	2,599.6	
12	MEDICAL RECORDS	C12	C12	MRD	38.0	17.2	6.0	7.42%	718.7	784.0	1,502.7	1,519.9	
13	MEDICAL STAFF ADMINISTRATION	C13	C13	MSA	11.4	5.2	1.0	1.24%	120.1	131.0	251.1	256.3	
14	NURSING ADMINISTRATION	C14	C14	NAD	17.0	7.7	1.1	1.31%	126.9	138.4	265.3	273.0	
15	ORGAN ACQUISITION OVERHEAD	C15	C15	OAO	0.0	0.0	0.0	0.00%	-	-	-	-	
16	MED/SURG ACUTE	D01	D01	MSG	385.7	174.4	9.0	11.20%	1,084.8	1,183.4	2,268.3	2,442.7	
17	PEDIATRIC ACUTE	D02	D02	PED	7.8	3.5	0.4	0.51%	49.4	53.9	103.3	106.8	
18	PSYCHIATRIC ACUTE	D03	D03	PSY	16.0	7.2	0.7	0.87%	84.3	91.9	176.2	183.4	
19	OBSTETRICS ACUTE	D04	D04	OBS	28.4	12.9	0.6	0.80%	77.5	84.5	162.0	174.9	
20	DEFINITIVE OBSERVATION	D05	D05	DEF	0.0	0.0	0.0	0.00%	-	-	-	-	
21	MED/SURG INTENSIVE CARE	D06	D06	MIS	70.8	32.0	3.6	4.51%	436.8	476.5	913.4	945.4	
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	17.1	7.7	0.5	0.58%	56.2	61.3	117.5	125.2	

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: Peninsula Regional Medical Center
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 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 D1	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	115.6	52.3	2.4	2.98%	289	315	604	655.8
33	CLINICAL SERVICES	D19	D19	CL	29.7	13.4	0.7	0.87%	84	92	176	189.6
34	PSYCH. DAY & NIGHT CARE	D20	D20	PDC	4.2	1.9	0.0	0.00%	0	0	0	1.9
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	38.8	17.5	0.0	0.00%	0	0	0	17.5
37	LABOR & DELIVERY SERVICES	D23	D23	DEL	35.9	16.2	3.5	4.36%	422	461	883	899.2
38	OPERATING ROOM	D24	D24	OR	118.4	53.5	3.2	4.00%	387	423	810	863.6
39	OPERATING ROOM CLINIC	D24a	D24a	ORC	2.9	1.3	0.0	0.00%	0	0	0	1.3
40	ANESTHESIOLOGY	D25	D25	ANS	5.1	2.3	0.3	0.36%	35	38	73	75.2
41	LABORATORY SERVICES	D28	D28	LAB	56.2	25.4	5.3	6.62%	641	699	1,341	1,366.1
42	ELECTROCARDIOGRAPHY	D30	D30	EKG	7.8	3.5	0.5	0.58%	56	61	117	121.0
43	INTERVENTIONAL RADIOLOGY / CARDIOVASCULAR	D31	D31	IRC	47.1	21.3	3.4	4.22%	409	446	855	875.9
44	RADIOLOGY-DIAGNOSTIC	D32	D32	RAD	42.6	19.2	3.6	4.44%	430	469	899	918.5
45	CT SCANNER	D33	D33	CAT	14.0	6.3	0.4	0.44%	43	46	89	95.4
46	RADIOLOGY-THERAPEUTIC	D34	D34	RAT	20.2	9.1	2.4	2.93%	284	310	593	602.5
47	NUCLEAR MEDICINE	D35	D35	NUC	7.0	3.2	1.1	1.38%	134	146	279	282.7
48	RESPIRATORY THERAPY	D36	D36	RES	37.3	16.9	1.6	2.04%	198	216	413	430.0
49	PULMONARY FUNCTION TESTING	D37	D37	PUL	3.4	1.5	0.5	0.58%	56	61	117	119.0
50	ELECTROENCEPHALOGRAPHY	D38	D38	EEG	1.9	0.8	0.5	0.58%	56	61	117	118.3
51	PHYSICAL THERAPY	D39	D39	PTH	16.0	7.2	1.2	1.45%	140	153	294	300.9
52	OCCUPATIONAL THERAPY	D40	D40	OTH	4.0	1.8	0.1	0.07%	7	7	14	16.0
53	SPEECH LANGUAGE PATHOLOGY	D41	D41	STH	3.0	1.3	0.1	0.07%	7	7	14	15.5
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	1.0	0.5	0.0	0.00%	0	0	0	0.5

ALLOCATION OF EXPENSES (CAFFETERIA, PARKING, DATA PROCESSING)

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 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	Cx D1	FTE'S ALLOCATED	BASIS	WAGES, SALARIES, & F. BENEFIT	OTHER EXPENSES	DP ALLOCATION	TOTAL ALLOCATED EXPENSE
62	FREE STANDING EMERGENCY	D50	D50	FSE	0.0	0.0	0.0	0.00%	0	0	0	-
63	MAGNETIC RESONANCE IMAGING	D51	D51	MRI	5.0	2.3	0.3	0.36%	35	38	73	75.2
64	ADOLESCENT DUAL DIAGNOSED	D52	D52	ADD	0.0	0.0	0.0	0.00%	0	0	0	-
65	LITHOTRIPSY	D53	D53	LIT	0.1	0.0	0.0	0.00%	0	0	0	0.9
66	REHABILITATION	D54	D54	RHB	0.0	0.0	0.0	0.00%	0	0	0	-
67	OBSERVATION	D55	D55	QBV	29.2	13.2	0.0	0.00%	0	0	0	13.2
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	0.0	0.00%	0	0	0	-
90	PARKING	E02	E02	PAR	0.0	0.0	0.0	0.00%	0	0	0	-
91	DOCTOR'S PRIVATE OFFICE RENT	E03	E03	DPO	0.0	0.0	0.0	0.00%	0	0	0	-
92	OFFICE & OTHER RENTAL	E04	E04	QOR	0.2	0.1	0.0	0.00%	0	0	0	0.1
93	RETAIL OPERATIONS	E05	E05	REO	12.3	5.6	0.0	0.00%	0	0	0	5.6
94	PATIENTS TELEPHONES	E06	E06	PTE	4.0	1.8	0.0	0.00%	0	0	0	1.8
95	RESEARCH	F01	F01	REG	0.0	0.0	0.0	0.00%	0	0	0	-
96	NURSING EDUCATION	F02	F02	RNS	0.0	0.0	0.0	0.00%	0	0	0	-
97	OTHER HEALTH PROFESSION EDUCATION	F03	F03	OHE	0.0	0.0	0.0	0.00%	0	0	0	-
98	COMMUNITY HEALTH EDUCATION	F04	F04	CHE	8.1	3.7	0.0	0.00%	0	0	0	3.7
99	MED/SURG ACUTE	D01	P2A	MSG	0.0	0.0	0.0	0.00%	0	0	0	-
100	PEDIATRIC ACUTE	D02	P2A	PED	0.0	0.0	0.0	0.00%	0	0	0	-

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: Peninsula Regional Medical Center
 INSTITUTION NUMBER: 210019
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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 D1	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)

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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 D1	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	SIH	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	IITH	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 (CAETERIA, PARKING, DATA PROCESSING)

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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
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	EKG	0.0	0.0						-
206	PHYSICAL THERAPY	D39	P3	PTH	0.0	0.0						-

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

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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	MRJ	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	GTB	0.0	0.0						-
231	FAMILY THERAPIES	D76	P3	FTB	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									-
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ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

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///	DISTRIBUTION OF LOSS PER FTE	LOOK UP	SCHED	CODE	NO. OF FTES	C x D1	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	BEG	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						-

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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	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	IIT	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	OFT	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	D05	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 (PBP)	D21	P5C	AMS	0.0	0.0						-

ALLOCATION OF EXPENSES (CAFETERIA, PARKING, DATA PROCESSING)

INSTITUTION NAME: Peninsula Regional Medical Center
 INSTITUTION NUMBER: 210019
 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 D1	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: Peninsula Regional Medical Center
 INSTITUTION NUMBER: 210019
 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 D1	FTE'S ALLOCATED	BASIS	WAGES, SALARIES, & F. BENEFIT	OTHER EXPENSES	DP ALLOCATION	TOTAL ALLOCATED EXPENSE
369	PSYCHIATRIC CHILD/ADOLESCENT	D71	PSI	PCD	0.0	0.0						-
370	PSYCHIATRIC GERIATRIC	D73	PSI	PSG	0.0	0.0						-
371	INDIVIDUAL THERAPIES	D74	PSI	ITH	0.0	0.0						-
372	GROUP THERAPIES	D75	PSI	GTH	0.0	0.0						-
373	FAMILY THERAPIES	D76	PSI	FTH	0.0	0.0						-
374	PSYCHOLOGICAL TESTING	D77	PSI	PST	0.0	0.0						-
375	EDUCATION	D78	PSI	PSE	0.0	0.0						-
376	OTHER THERAPIES	D79	PSI	OPT	0.0	0.0						-
377	ELECTROCONVULSIVE THERAPY	D80	PSI	ETH	0.0	0.0						-
378	ACTIVITY THERAPIES	D81	PSI	ATH	0.0	0.0						-
378	PEDIATRIC STEP-DOWN	D82	PSI	PSD	0.0	0.0						-
379	340B CLINIC SERVICES	D83	PSJ	CL-340	0.0	0.0						-
380	340B RADIOLOGY - THERAPEUTIC	D84	PSJ	RAT-340	0.0	0.0						-
381	340B OR CLINIC SERVICES	D85	PSJ	ORC-340	0.0	0.0						-
382	340B LABORATORY SERVICES	D86	PSJ	LAB-340	0.0	0.0						-
383	340B DRUGS	D87	PSJ	CDS-340	0.0	0.0						-
384	FREESTANDING CLINIC SERVICES	UR01	UR01	FSC1	185.0	83.7						83.7
385	HOME HEALTH SERVICES	UR02	UR02	HHC	0.0	0.0						-
386	OUTPATIENT RENAL DIALYSIS	UR03	UR03	ORD	0.1	0.0						0.0
387	SKILLED NURSING CARE	UR04	UR04	ECF1	0.0	0.0						-
388	LABORATORY NON-PATIENT	UR05	UR05	ULB	73.5	33.2						33.2
389	PHYSICIANS PART B SERVICES	UR06	UR06	UPB	107.0	48.4						48.4
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				2,139.7	967.6	80.3	100.00%	9,686.1	10,566.3	20,252.4	21,220.0

UNASSIGNED EXPENSES

U.A.

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210019

	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	3,630.5	150.0	2,448.9	6,229.4	28,942.9	2,898.0	800.0	0.0	5,249.9	44,120.2	A
B	ALLOC. TO AUX. ENTERPRISES & UNREGULATED SERVICES	RECORDS	(1,106.0)	(2.4)	0.0	(1,108.4)	(276.6)	(1,074.5)	0.0	0.0	(34.9)	(2,494.4)	B
C	FISCAL YEAR EXP. - ADJUSTED	A + B	2,524.5	147.6	2,448.9	5,121.0	28,666.3	1,823.5	800.0	0.0	5,215.0	41,625.8	C

HOSPITAL BASED PHYSICIANS

PIA

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER: 210019

		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	0.0	0.0	0.0	0.0	0.0	A1
A2	Med/Surg Acute	MSG	0.0	0.0	0.0	310.8	0.0	310.8	A2
A3	Pediatric Acute	PED	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	A4
A5	Obstetrics Acute	OBS	0.0	0.0	0.0	37.5	0.0	37.5	A5
A6	Definitive Observation	DEF	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	A7
A8	Coronary Care	CCU	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	A9
A10	Neonatal Intensive Care	NEO	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	A11
A12	Psychiatric Intensive Care	PSI	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	A13
A14	Oncology	ONC	0.0	0.0	0.0	0.0	0.0	0.0	A14
A15	Newborn Nursery	NUR	0.0	0.0	0.0	135.0	0.0	135.0	A15
A16	Premature Nursery	PRE	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	A17
A18	Emergency Services	EMG	0.0	0.0	0.0	54.5	0.0	54.5	A18
A19	Clinical Services	CL	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	A20
A21	Ambulatory Surgery (FBP)	AMS	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	A22
A23	Labor & Delivery Services	DEL	0.0	0.0	0.0	0.0	0.0	0.0	A23
A24	Operating Room	OR	0.0	0.0	0.0	108.8	0.0	108.8	A24
A25	Operating Room Clinic	ORC	0.0	0.0	0.0	0.0	0.0	0.0	A25
A26	Anesthesiology	ANS	0.0	0.0	0.0	1.3	0.0	1.3	A26
A27	Laboratory Services	LAB	0.0	0.0	0.0	326.0	0.0	326.0	A27
A28	Electrocardiography	EKG	0.0	0.0	0.0	12.0	0.0	12.0	A28
A29	Interventional Radiology / Cardiovascular	IRC	0.0	0.0	0.0	148.5	0.0	148.5	A29
A30	Radiology-Diagnostic	RAD	0.0	0.0	0.0	71.3	0.0	71.3	A30
A31	CT Scanner	CAT	0.0	0.0	0.0	0.0	0.0	0.0	A31
A32	Radiology-Therapeutic	RAT	0.0	0.0	0.0	20.0	0.0	20.0	A32
A33	Nuclear Medicine	NUC	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	A34

HOSPITAL BASED PHYSICIANS

P. B.

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER: 210019

COST CENTER	CODE	COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	TOTAL	
		Research	Chief of Medical Staff	Medical Care Review	Administration & Supervision	Part B Services	EDUCATION			
A35	Pulmonary Function Testing	PUL	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A35
A36	Electroencephalography	BEG	0.0	0.0	0.0	80.7	0.0	0.0	80.7	A36
A37	Physical Therapy	PTH	0.0	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	0.0	A38
A39	Speech Language Pathology	STH	0.0	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	0.0	A40
A41	Audiology	AUD	0.0	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	0.0	A42
A43	Renal Dialysis	RDL	0.0	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	0.0	A44
A45	Ambulatory Surgery	AOR	0.0	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	0.0	A46
A47	Hyperbaric Chamber	HYP	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A47
A48	Free Standing Emergency	FSE	0.0	0.0	0.0	0.0	0.0	0.0	0.0	A48
A49	Magnetic Resonance Imaging	MRI	0.0	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	0.0	A50
A51	Lithotripsy	LIT	0.0	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	0.0	A52
A53	Observation	OBV	0.0	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	0.0	A54
A55	Oncology O/P Clinic	OCL	0.0	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	0.0	A56
A57	Psychiatric Adult	PAD	0.0	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	0.0	A58
A59	Psychiatric Geriatric	PSG	0.0	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	0.0	A60
A61	Group Therapies	GTH	0.0	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	0.0	A62
A63	Psychological Testing	PST	0.0	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	0.0	A64
A65	Other Therapies	OPT	0.0	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	0.0	A66
A67	Activity Therapies	ATH	0.0	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	0.0	A68
A69	340B Clinic Services	CL-340	0.0	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	0.0	A70
A71	340B OR Clinic Services	ORC-340	0.0	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	0.0	A72
A73	340B Drugs	CDS-340	0.0	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	0.0	0.0	1,306.4	0.0	0.0	1,306.4	B
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Reporting Schedule

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

PAR

E02

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER: 210019

	VOLUME DATA	FISCAL YEAR UNITS
A	# of Spaces	604

COL. 1

COL. 2

COL. 3

COL. 4

Parking

SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES REVENUE	EXPENSE REVENUE PER UNIT
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FISCAL YEAR DATA

B	FISCAL YEAR EXPENSES	RECORDS	248.5	0.0	248.5	XXXXX	B
C	ALLOCATION FROM CAFETERIA, PARKING, ETC.	SCH OA	XXXXX	XXXXX	XXXXX	XXXXX	C
D	ALLOCATION FROM GENERAL SERVICE CENTER	//////	XXXXX	XXXXX	XXXXX	XXXXX	D
///	COL. 5 COST CENTER	COL. 6 CODE	//////	XXXXX	XXXXX	XXXXX	///
D01	General Accounting	FIS	1.2	0.2	1.4	XXXXX	D01
D02	Interest Long Term	ILT	0.0	1.4	1.4	XXXXX	D02
D03	Hospital Administration	MGT	9.5	2.3	11.8	XXXXX	D03
D04	Plant Operations	POP	1.0	2.9	3.9	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	DONATED SERVICES & COMMODITIES	RECORDS	0.0	0.0	0.0	XXXXX	F
G	FISCAL YEAR ADJUSTED EXPENSES	B+C+D+E	260.2	6.8	267.0	0.44205	G

FISCAL YEAR PROFIT (LOSS)

H	FISCAL YEAR REVENUE	RECORDS	XXXXX	XXXXX	0.0	XXXXX	H
I	PROFIT (LOSS)	G - F	XXXXX	XXXXX	(267.0)	XXXXX	I
J	AMOUNT TREATED AS FRINGE	RECORDS	XXXXX	XXXXX	0.0	XXXXX	J
K	AMOUNT TREATED AS OFC	H - I	XXXXX	XXXXX	(267.0)	XXXXX	K

FTE DATA

S	FISCAL YEAR HOURS WORKED/2080	RECORDS	5.9
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S

AUXILIARY ENTERPRISES

OOR

E04

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210019

	VOLUME DATA	FISCAL YEAR UNITS
A	Sq Feet	89

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

Office & Other Rental

SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES REVENUE	EXPENSE REVENUE PER UNIT
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FISCAL YEAR DATA

B	FISCAL YEAR EXPENSES	RECORDS	14.1	15.4	29.5	XXXXX	B
C	ALLOCATION FROM CAFETERIA, PARKING, ETC.	SCH OA	0.1	XXXXX	0.1	XXXXX	C
D	ALLOCATION FROM GENERAL SERVICE CENTER	//////	XXXXX	XXXXX	XXXXX	XXXXX	D
///	COL. 5 COST CENTER	COL. 6 CODE	//////	XXXXX	XXXXX	XXXXX	///
D01	Depreciation & Amortization	DEP	0.0	78.1	78.1	XXXXX	D01
D02	Housekeeping	HKP	5.2	2.7	7.9	XXXXX	D02
D03	Other Insurance	OIN	0.0	0.4	0.4	XXXXX	D03
D04	Plant Operations	POP	2.0	6.0	8.0	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	DONATED SERVICES & COMMODITIES	RECORDS	0.0	0.0	0.0	XXXXX	F
G	FISCAL YEAR ADJUSTED EXPENSES	B+C+D+E	21.4	102.6	124.0	1.39315	G

FISCAL YEAR PROFIT (LOSS)

H	FISCAL YEAR REVENUE	RECORDS	XXXXX	XXXXX	194.2	XXXXX	H
I	PROFIT (LOSS)	G - F	XXXXX	XXXXX	70.2	XXXXX	I
J	AMOUNT TREATED AS FRINGE	RECORDS	XXXXX	XXXXX	0.0	XXXXX	J
K	AMOUNT TREATED AS OFC	H - I	XXXXX	XXXXX	70.2	XXXXX	K

FTE DATA

S	FISCAL YEAR HOURS WORKED/2080	RECORDS	0.2	S
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AUXILIARY ENTERPRISES

REO

E05

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210019

	VOLUME DATA	FISCAL YEAR UNITS
A	Sq Feet	1,407

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

Retail Operations

SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES REVENUE	EXPENSE REVENUE PER UNIT
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FISCAL YEAR DATA

B	FISCAL YEAR EXPENSES	RECORDS	1,206.7	5,400.1	6,606.8	XXXXX	B
C	ALLOCATION FROM CAFETERIA, PARKING, ETC.	SCH OA	5.6	XXXXX	5.6	XXXXX	C
D	ALLOCATION FROM GENERAL SERVICE CENTER	//////	XXXXX	XXXXX	XXXXX	XXXXX	D
///	COL. 5 COST CENTER	COL. 6 CODE	//////	XXXXX	XXXXX	XXXXX	///
D01	General Accounting	FIS	33.0	5.1	38.1	XXXXX	D01
D02	Housekeeping	HKP	6.3	3.4	9.7	XXXXX	D02
D03	Hospital Administration	MGT	252.1	61.3	313.4	XXXXX	D03
D04	Plant Operations	POP	6.1	18.2	24.3	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	DONATED SERVICES & COMMODITIES	RECORDS	0.0	0.0	0.0	XXXXX	F
G	FISCAL YEAR ADJUSTED EXPENSES	B+C+D+E	1,509.8	5,488.1	6,997.9	4.97360	G

FISCAL YEAR PROFIT (LOSS)

H	FISCAL YEAR REVENUE	RECORDS	XXXXX	XXXXX	6,400.3	XXXXX	H
I	PROFIT (LOSS)	G - F	XXXXX	XXXXX	(597.6)	XXXXX	I
J	AMOUNT TREATED AS FRINGE	RECORDS	XXXXX	XXXXX	0.0	XXXXX	J
K	AMOUNT TREATED AS OFC	H - I	XXXXX	XXXXX	(597.6)	XXXXX	K

FTE DATA

S	FISCAL YEAR HOURS WORKED/2080	RECORDS	12.3
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S

AUXILIARY ENTERPRISES

E06

PTE

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210019

	VOLUME DATA	FISCAL YEAR UNITS
A	# of Spaces	292

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

Patients Telephones

SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES REVENUE	EXPENSE REVENUE PER UNIT
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FISCAL YEAR DATA

B	FISCAL YEAR EXPENSES	RECORDS	192.0	45.5	237.5	XXXXX	B
C	ALLOCATION FROM CAFETERIA, PARKING, ETC.	SCH OA	1.8	XXXXX	1.8	XXXXX	C
D	ALLOCATION FROM GENERAL SERVICE CENTER	///////	XXXXX	XXXXX	XXXXX	XXXXX	D
///	COL. 5 COST CENTER	COL. 6 CODE	///////	XXXXX	XXXXX	XXXXX	///
D01	Depreciation & Amortization	DEP	0.0	18.2	18.2	XXXXX	D01
D02	General Accounting	FIS	1.2	0.2	1.4	XXXXX	D02
D03	Housekeeping	HKP	0.6	0.3	0.9	XXXXX	D03
D04	Interest Long Term	ILT	0.0	0.8	0.8	XXXXX	D04
D05	Hospital Administration	MGT	9.1	2.2	11.3	XXXXX	D05
D06	Other Insurance	OIN	0.0	1.1	1.1	XXXXX	D06
D07	Plant Operations	POP	0.5	1.6	2.1	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	DONATED SERVICES & COMMODITIES	RECORDS	0.0	0.0	0.0	XXXXX	F
G	FISCAL YEAR ADJUSTED EXPENSES	B+C+D+E	205.2	69.9	275.1	0.94215	G

FISCAL YEAR PROFIT (LOSS)

H	FISCAL YEAR REVENUE	RECORDS	XXXXX	XXXXX	0.0	XXXXX	H
I	PROFIT (LOSS)	G - F	XXXXX	XXXXX	(275.1)	XXXXX	I
J	AMOUNT TREATED AS FRINGE	RECORDS	XXXXX	XXXXX	0.0	XXXXX	J
K	AMOUNT TREATED AS OFC	H - I	XXXXX	XXXXX	(275.1)	XXXXX	K

FTE DATA

S	FISCAL YEAR HOURS WORKED/2080	RECORDS	4.0
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S

AUXILIARY ENTERPRISES

CAF

E07

INSTITUTION NAME: Peninsula Regional Medical Center FISCAL YEAR 6/30/2018
 INSTITUTION NUMBER: 210019

	VOLUME DATA	FISCAL YEAR UNITS
A	Eq. Meals Serve	184,254

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

Cafeteria

SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES REVENUE	EXPENSE REVENUE PER UNIT
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FISCAL YEAR DATA

B	FISCAL YEAR EXPENSES	RECORDS	649.7	791.9	1,441.6	XXXXX	B
C	ALLOCATION FROM CAFETERIA, PARKING, ETC.	SCH 0A	XXXXX	XXXXX	XXXXX	XXXXX	C
D	ALLOCATION FROM GENERAL SERVICE CENTER	///////	XXXXX	XXXXX	XXXXX	XXXXX	D
///	COL. 5 COST CENTER	COL. 6 CODE	///////	XXXXX	XXXXX	XXXXX	///
D01	General Accounting	FIS	7.2	1.1	8.3	XXXXX	D01
D02	Housekeeping	HKP	69.0	37.1	106.1	XXXXX	D02
D03	Hospital Administration	MGT	27.5	6.7	34.2	XXXXX	D03
D04	Plant Operations	POP	67.3	200.9	268.2	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	DONATED SERVICES & COMMODITIES	RECORDS	0.0	0.0	0.0	XXXXX	F
G	FISCAL YEAR ADJUSTED EXPENSES	B+C+D+E	820.7	1,037.7	1,858.4	0.01009	G

FISCAL YEAR PROFIT (LOSS)

H	FISCAL YEAR REVENUE	RECORDS	XXXXX	XXXXX	890.8	XXXXX	H
I	PROFIT (LOSS)	G - F	XXXXX	XXXXX	(967.6)	XXXXX	I
J	AMOUNT TREATED AS FRINGE	RECORDS	XXXXX	XXXXX	(967.6)	XXXXX	J
K	AMOUNT TREATED AS OFC	H - I	XXXXX	XXXXX	0.0	XXXXX	K

FTE DATA

S	FISCAL YEAR HOURS WORKED/2080	RECORDS	19.3
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S

OTHER INSTITUTIONAL PROGRAMS

F04

CHE

INSTITUTION NAME: Peninsula Regional Medical Center
 INSTITUTION NUMBER: 210019

FISCAL YEAR 6/30/2018

	VOLUME DATA	FISCAL YEAR UNITS
A	# of Participants	19,072

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

Community Health Education

SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES REVENUE	EXPENSE REVENUE PER UNIT
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FISCAL YEAR DATA

B	FISCAL YEAR EXPENSES	RECORDS	718.0	34.9	752.9	XXXXX	B
C	ALLOCATION FROM CAFETERIA, PARKING, ETC.	SCH OA	3.7	XXXX	3.7	XXXXX	C
D	ALLOCATION FROM GENERAL SERVICE CENTER	////	XXXXXX	XXXX	XXXXXX	XXXXXX	D
///	COL. 5 COST CENTER	COL. 6 CODE	////	XXXXXX	XXXX	XXXXXX	
D01	General Accounting	FIS	3.8	0.6	4.4	XXXXXX	D01
D02	Housekeeping	HKP	11.6	6.2	17.8	XXXXXX	D02
D03	Hospital Administration	MGT	28.7	7.0	35.7	XXXXXX	D03
D04	Plant Operations	POP	2.3	6.8	9.1	XXXXXX	D04
D05					0.0	XXXXXX	D05
D06					0.0	XXXXXX	D06
D07					0.0	XXXXXX	D07
D08					0.0	XXXXXX	D08
D09					0.0	XXXXXX	D09
D10					0.0	XXXXXX	D10
D11					0.0	XXXXXX	D11
D12					0.0	XXXXXX	D12
D13					0.0	XXXXXX	D13
D14					0.0	XXXXXX	D14
E	CAPITAL FACILITIES ALLOWANCE	SCH H3		0.0	0.0	XXXXX	E
F	FISCAL YEAR ADJUSTED EXPENSES	B+C+D	768.1	55.5	823.6	0.04318	F

FISCAL YEAR PROFIT (LOSS)

G	FISCAL YEAR REVENUE	RECORDS	XXXXXX	XXXXXX	263.0	XXXXXX	G
H	PROFIT (LOSS)	F - E	XXXXXX	XXXXXX	(560.6)	XXXXXX	H

FTE DATA

I	FISCAL YEAR HOURS WORKED/2080	RECORDS	8.1
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I

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

RC

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210019

	Expenses	Sources	HSCRC Regulated	Unregulated	Total	
A	Unassigned Expense	Sch. UA, Col. 10	41,625.8	2,494.4	44,120.2	A
B	Physicians Part B Services	P2 Ln A Col 7 UR6 Ln B Col 3	0.0	42,832.0	42,832.0	B
C	Physician Support Services	Sch. P3, Line A, Col. 7 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	93,353.6	2,674.7	96,028.3	E
F	Patient Care Centers	Schs D1 - D81, Line B, Col. 4	200,789.8	//////////	200,789.8	F
G	Auxiliary Enterprises	Schs E1 - E9 Line B, Col 3	967.6	7,596.3	8,563.9	G
H	Other Institution Programs	Schs F1 - F4, Line B, Col 3	//////////	752.9	752.9	H
I	Unregulated Services	Schs UR1-UR15 Less-Ln B & C	//////////	34,273.6	34,273.6	I
J	Total Operating Expenses	A+B+C+D+E+F+G+H+I	336,736.8	90,623.9	427,360.7	J
K	Non-Operating Expenses	Non-Operating Expenses	//////////	0.0	0.0	K
L	Total Expenses	J + K	336,736.8	90,623.9	427,360.7	L
M	Total Operating Expenses - RE	Sche RE, Line S	336,127.3	91,234.3	427,361.6	M
N	Non-Operating Expenses - RE	Sche RE, Line V	//////////	0.0	0.0	N
O	Total Expenses - RE	M + N	336,127.3	91,234.3	427,361.6	O
P	Reconciliation Amount	O - L	(609.5)	610.4	0.9	P
Q	Nomenclature	//////////	//////////	//////////	//////////	Q
Q1	Other Non-Operating Expense	Audited Financial Statements	0.0	0.0	0.0	Q1
Q2	Rounding		(0.9)	(0.0)	(0.9)	Q2
Q3	O/H Exp Alloc. to Aux Ent. Fringe	E Schedules	433.9	(433.9)	0.0	Q3
Q4	Aux Ent. Loss Allocated to F and UR	OA Schedule	176.5	(176.5)	0.0	Q4
Q5	Ineligible Interns/Residents	P5 Schedule	0.0	0.0	0.0	Q5
Q6						Q6

SUPPLEMENTAL SCHEDULE 5

Peninsula. Regional Medical Center

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

For The Fiscal Year Ended June 30, 2017

Income Statement		
RE Line T Excess (Deficit) Operating Rev. Over Operating Expenses	\$	(20,506.0)
RE Line U Detailed Non-Operating: Income / (Expense)		
U1 Contributions (Unrestricted)	\$	20.9
U2 Interest & Investment Income		3,947.3
U3 Investment - Gains / (Losses) - Realized		10,850.0
U4 Investment - Gains / (Losses) - Unrealized		
U5 Swap Agreements - Gains / (Losses) - Realized		
V Other (Specify)		
RE Line W Excess Profit / (Loss)		<u>(5,687.8)</u>
Other Significant Financial Information		
CC Swap Agreements - Gains / (Losses) - Unrealized		
DD Collateral Received / (Posted) - Swap Agreements		
EE Retirement of Debt - Gains / (Losses)		
FF Pension Adjustments - Defined Benefit Plans		
GG Other (Specify)		17,941.7
HH Total	\$	<u>17,941.7</u>

STATEMENT OF REVENUE AND EXPENSES

RE

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL

6/30/2018INSTITUTION NUMBER: 210019

		COL 1	COL 2	COL 3	
		Regulated	Unregulated	Total	
		xxxx	xxxx	xxxx	
Operating Revenues:					
A	Gross Revenues from Daily Hospital Services	99,475.7	0.0	99,475.7	A
B	Gross Revenues from Ambulatory Services	67,331.5	0.0	67,331.5	B
C	Gross Revenues from Inpatient Ancillary Services	155,333.7	0.0	155,333.7	C
D	Gross Revenues from Outpatient Ancillary Services	128,195.6	91,994.4	220,190.0	D
E	Gross Patient Revenues	450,336.5	91,994.4	542,330.9	E
Deductions from Revenues:					
F	Provision for Bad Debts	9,128.0	(30.5)	9,097.5	F
G	Charity/Uncompensated Care	6,605.5	999.4	7,604.9	G
H	Contractual Adjustments	23,969.2	40,008.5	63,977.7	H
H1	Uncompensated Care Fund Payments	678.8	0.0	678.8	H1
H2	Denials	5,964.0	975.4	6,939.4	H2
I	Other Deductions from Revenues	21,752.6	7,026.4	28,779.0	I
J	Total Deductions from Revenues	68,098.1	48,979.2	117,077.3	J
J1	Uncompensated Care Fund Receipts	0.0	0.0	0.0	J1
K	Net Patient Revenues	382,238.4	43,015.2	425,253.6	K
L	Other Operating Revenues	1,205.7	7,799.7	9,005.4	L
M	Net Operating Revenues	383,444.1	50,814.9	434,259.0	M
Operating Expenses:					
N	Salaries, Wages, and Employee Benefits	164,173.8	58,127.7	222,301.5	N
O	Professional Fees	11,507.4	7,808.2	19,315.6	O
P	Supplies	94,687.9	16,784.8	111,472.7	P
Q	Depreciation/Amortization, Leases/Rentals	30,489.9	1,351.1	31,841.0	Q
R	Other Expenses	35,268.3	7,162.5	42,430.8	R
S	Total Operating Expenses	336,127.3	91,234.3	427,361.6	S
T	Excess (Deficit) Operating Revenues Over Operating Expenses	47,316.8	(40,419.4)	6,897.4	T
U	Non-Operating Revenues	xxxx	38,206.6	38,206.6	U
V	Non-Operating Expenses	xxxx	0.0	0.0	V
W	Excess (Deficit) Revenues Over Expenses-Regulated and Unregulated	47,316.8	(2,212.8)	45,104.0	W
X	Operating Expenses per EIPD	2.54656	xxxx	xxxx	X
Y	Operating Expenses per EIPA	11.04264	xxxx	xxxx	Y
Z	Working Capital Ratio = Current Assets/Current Liabilities	1.9	xxxx	xxxx	Z
AA	Admissions	17,223	0	17,223	AA
BB	EIPA's	30,439		36,657	BB

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

INSTITUTION NAME: Peninsula Regional Medical Center

RE - R 1

INSTITUTION NO.: 210019

	Col. 1	Col. 2	Col. 3	Col. 4	Col. 5	Col. 6	Col. 7	Col. 8	Col. 9
	Audited Financial Statements	Miscellaneous Adjustments	AUXILIARY ENTERPRISES						
			E01	E02	E03	E04	E05	E06	E07
			Ambulance	Parking	Dr. Office	Other Office	Retail Ops.	Pt. Phones	Cafeteria
Gross Patient Revenue	548,732.0	(6,401.1)	-	-	-	-	-	-	-
Provision for Bad Debt	9,098.0	-	-	-	-	-	-	-	-
Charity Care	7,898.0	(293.6)	-	-	-	-	-	-	-
Contractual Allowances	100,082.0	292.9	-	-	-	-	-	-	-
Total Deductions	117,078.0	(0.7)	-	-	-	-	-	-	-
Net Patient Revenue	431,654.0	(6,400.4)	-	-	-	-	-	-	-
Other Operating Revenue	2,605.0	6,400.4	-	-	-	194.2	6,400.3	-	890.8
Total Operating Revenue	434,259.0	-	-	-	-	194.2	6,400.3	-	890.8
Operating Expenses:									
Salaries, Wages and Benefits	222,534.0	(232.5)	-	260.2	-	21.4	1,509.8	205.2	-
Professional Fees	-	19,315.6	-	-	-	-	38.7	-	-
Supplies	170,635.0	(59,162.3)	-	-	-	-	5,309.1	-	-
Depreciation / Amortization	28,943.0	-	-	-	-	78.1	-	18.2	-
Leases / Rentals	-	2,898.0	-	-	-	-	-	-	-
Interest	5,250.0	-	-	1.4	-	-	-	0.8	-
Other Expenses	-	37,180.8	-	5.4	-	24.5	140.3	50.9	890.8
Total Operating Expense	427,362.0	(0.4)	-	267.0	-	124.0	6,997.9	275.1	890.8
Income from Operations	6,897.0	0.4	-	(267.0)	-	70.2	(597.6)	(275.1)	-
Non-Operating Revenues	38,207.0	(0.4)	-	-	-	-	-	-	-
Non-Operating Expenses	-	-	-	-	-	-	-	-	-
Excess Revenue Over Expenses	45,104.0	0.0	-	(267.0)	-	70.2	(597.6)	(275.1)	-

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

INSTITUTION NAME: Peninsula Region

RE - R 2

INSTITUTION NO.: 210019

	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	-	-	-	-	-	-	23,276.1	-	1.4
Provision for Bad Debt	-	-	-	-	-	-	(8.9)	-	-
Charity Care	-	-	-	-	-	-	297.8	-	-
Contractual Allowances	-	-	-	-	-	-	12,064.8	-	-
Total Deductions	-	-	-	-	-	-	12,353.7	-	-
Net Patient Revenue	-	-	-	-	-	-	8,890.2	-	1.4
Other Operating Revenue	-	-	-	-	-	263.0	51.4	-	-
Total Operating Revenue	-	-	-	-	-	263.0	8,941.6	-	1.4
Operating Expenses:									
Salaries, Wages and Benefits	-	-	-	-	-	768.1	15,624.9	-	10.1
Professional Fees	-	-	-	-	-	-	199.4	-	-
Supplies	-	-	-	-	-	2.3	10,343.0	-	-
Depreciation / Amortization	-	-	-	-	-	-	-	-	-
Leases / Rentals	-	-	-	-	-	-	960.8	-	-
Interest	-	-	-	-	-	-	-	-	-
Other Expenses	-	-	-	-	-	53.2	2,816.4	-	7.9
Total Operating Expense	-	-	-	-	-	823.6	29,944.5	-	18.0
Income from Operations	-	-	-	-	-	(560.6)	(21,002.9)	-	(16.6)
Non-Operating Revenues	-	-	-	-	-	-	-	-	-
Non-Operating Expenses	-	-	-	-	-	-	-	-	-
Excess Revenue Over Expenses	-	-	-	-	-	(560.6)	(21,002.9)	-	(16.6)

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

INSTITUTION NAME: Peninsula Region

INSTITUTION NO.: 210019

	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	-	14,501.3	54,215.6	-	-	-	-	-	-
Provision for Bad Debt	-	(0.7)	(20.9)	-	-	-	-	-	-
Charity Care	-	7.8	693.8	-	-	-	-	-	-
Contractual Allowances	-	817.2	28,101.9	-	-	-	-	-	-
Total Deductions	-	824.3	28,774.8	-	-	-	-	-	-
Net Patient Revenue	-	13,416.3	20,707.3	-	-	-	-	-	-
Other Operating Revenue	-	-	-	-	-	-	-	-	-
Total Operating Revenue	-	13,416.3	20,707.3	-	-	-	-	-	-
Operating Expenses:									
Salaries, Wages and Benefits	-	4,828.4	34,899.6	-	-	-	-	-	-
Professional Fees	-	11.2	7,558.9	-	-	-	-	-	-
Supplies	-	1,130.4	-	-	-	-	-	-	-
Depreciation / Amortization	-	180.3	-	-	-	-	-	-	-
Leases / Rentals	-	113.7	-	-	-	-	-	-	-
Interest	-	32.7	-	-	-	-	-	-	-
Other Expenses	-	1,615.3	1,522.9	-	-	-	-	-	-
Total Operating Expense	-	7,912.0	43,981.4	-	-	-	-	-	-
Income from Operations	-	5,504.3	(23,274.1)	-	-	-	-	-	-
Non-Operating Revenues	-	-	-	-	-	-	-	-	-
Non-Operating Expenses	-	-	-	-	-	-	-	-	-
Excess Revenue Over Expenses	-	5,504.3	(23,274.1)	-	-	-	-	-	-

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

INSTITUTION NAME: Peninsula Region

RE - R 3

INSTITUTION NO.: 210019

	Col. 23e	Col. 23f	Col. 23g	Col. 24	Col. 25	Col. 26	Col. 27
	UR13	UR14	UR15	TOTAL	TOTAL	SCHEDULE	RE
	TBD	TBD	TBD	UNREGULATED	REGULATED	RE	LINE
Gross Patient Revenue	-	-	-	91,994.4	450,336.5	542,330.9	E
Provision for Bad Debt	-	-	-	(30.5)	9,128.5	9,098.0	F
Charity Care	-	-	-	999.4	6,605.0	7,604.4	G
Contractual Allowances	-	-	-	40,983.9	59,391.0	100,374.9	H
Total Deductions	-	-	-	41,952.8	75,124.5	117,077.3	J
Net Patient Revenue	-	-	-	50,041.6	375,212.0	425,253.6	K
Other Operating Revenue	-	-	-	7,799.7	1,205.7	9,005.4	L
Total Operating Revenue	-	-	-	50,814.9	376,417.7	434,259.0	M
Operating Expenses:							
Salaries, Wages and Benefits	-	-	-	58,127.7	164,173.8	222,301.5	N
Professional Fees	-	-	-	7,808.2	11,507.4	19,315.6	O
Supplies	-	-	-	16,784.8	94,687.9	111,472.7	P
Depreciation / Amortization	-	-	-	276.6	28,666.4	28,943.0	Q
Leases / Rentals	-	-	-	1,074.5	1,823.5	2,898.0	Q
Interest	-	-	-	34.9	5,215.1	5,250.0	R
Other Expenses	-	-	-	7,127.6	30,053.2	37,180.8	R
Total Operating Expense	-	-	-	91,234.3	336,127.3	427,361.6	S
Income from Operations	-	-	-	(40,419.4)	40,290.4	6,897.4	T
Non-Operating Revenues	-	-	-	38,206.6	XXXXXX	38,206.6	U
Non-Operating Expenses	-	-	-	-	XXXXXX	-	V
Excess Revenue Over Expenses	-	-	-	(2,212.8)	47,316.8	45,104.0	W

Peninsula Regional Medical Center
 Schedule RE-R Footnotes for Miscellaneous Adjustments Column
 FYE 6/30/18

A	\$	(6,401.1)	Reclass revenue from patient revenue to other retail pharmacy (6,400.3) Rounding (.8)
B			Rounding
C	\$	(293.6)	(\$678.8) Uncomp Care Fund plus \$385.9 Del. XIX ;plus .7 rounding
D	\$	678.8	\$678.8 Uncomp Care
E	\$	(36,104.3)	(\$28,779.0) other deductions; (\$385.9) Del. XIX; (\$6,939.4) Denials
F	\$	6,939.4	\$6,939.4 Denials
G	\$	28,779.0	\$28,779.0 Other deductions
H	\$	(0.7)	Summation of footnotes B+C+D+E+F+G
I	\$	(6,400.4)	Summation of footnote B minus footnote G.
J	\$	6,400.4	Other revenue of \$6,400.4 reclassified from patient revenue to other operating revenue
K	\$	-	Summation of footnote I+J
L	\$	(232.5)	Employee benefits department expenses (\$232.5) reclassified from Salaries to Supplies expense.
M	\$	19,315.6	Professional Fees \$19,315.6 reclassified from supplies expense to professional fees.
N	\$	(59,162.3)	Professional fees (\$19,315.6) from supplies to professional fees. Employee benefits department expense, reclassified \$232.5 from salaries to supplies expense. Leases and rentals (\$2,898.0) reclassified from supplies expense to lease rentals. Other expenses (\$37,180.8) from supplies expense to other expense. Rounding (.4)
O	\$	2,898.0	\$2 898.0 lease rentals reclassified from supplies expense.
P	\$	37,180.8	\$37,180.8 from supplies expense to other expense.
Q	\$	(0.4)	Summation of footnote L thru P.
R	\$	0.4	K - Q
S	\$	(0.4)	Rounding 0
T	\$	0.0	Summation of footnote R + T

OVERHEAD STATISTICAL APPOINTMENT

JSI & JSJ

INSTITUTION NAME:
INSTITUTION NUMBER:

Peninsula Regional Medical Center
710012

FISCAL YEAR

6/30/2018

UNIT COST CALCULATIONS	COL 1 DIETARY MEALS	COL 2 LAUNDRY & LINEN POUNDS	COL 3 PURCHASING STORES OTY EXP SCHED	COL 4 HOUSEKEEPING # OF HOURS	COL 5 CENT SUPPLY PHARMACY SOCIAL SERV	COL 6 PLANT OPERATIONS NET SQ FEET	COL 7 INPATIENT: PAC, MRD FIS.MGT,NAD	COL 7 A AMBULATORY: PAC, MRD FIS.MGT,NAD	COL 8 OUTPATIENT: PAC, MRD FIS.MGT,NAD	COL 9 MED STAFF ADMIN BIPAs	COL 10 UNASSIGNED EXPENSES	
A Overhead Expenses	3,686.4	1,409.3	3,382.0	5,822.5	10,428.3	14,708.7	21,198.9	5,198.1	14,012.8	1,830.4	5,121.0	
B Units	184,254	2,048,108	29,866	126,774	10,428	309,153	95,102.0	23,319.7	32,233.4	30,439	220,868.6	
C Cost per unit	0.020007	0.000688	0.113339	0.045928	1.000000	0.047577	0.222907	0.222907	0.434731	0.060133	0.023186	
STATISTICAL APPOINTMENT												
1 Med/Surg Acute	MSG	151,425	597,705	2,365.4	47,296		92,136	35,693.3			33,914.1	
2 Pediatric Acute	PRD	6,638	67,761	172.5	1,456		3,501	1,025.5			1,606.5	
3 Psychiatric Acute	PSY	9,965	29,402	2,074.2	3,963		8,690	3,643.7			5,509.9	
4 Obstetric Acute	OBS	12,752	19,352	137.8	2,066		4,823	2,926.0			4,176.6	
5 Definitive Observation	DBF	0	0	0.0	0		0				0.0	
6 Med/Surg Intensive Care	MIS	7,974	112,958	1,478.2	9,540		20,779	9,085.2			12,932.6	
7 Coronary Care	CCU	0	0	0.0	0		0				0.0	
8 Pediatric Intensive Care	PIC	0	0	0.0	0		0				0.0	
9 Neonatal Intensive Care	NEO	0	0	0.0	0		0				0.0	
10 Burn Care	BUR	0	0	0.0	0		0				0.0	
11 Psychiatric Intensive Care	PST	0	0	0.0	0		0				0.0	
12 Shock/Trauma	TRM	0	0	0.0	0		0				0.0	
13 Oncology	ONC	0	0	0.0	0		0				0.0	
14 Newborn Nursery	NUR		27,847	95.4	2,724		11,206	2,353.9			3,566.8	
15 Premature Nursery	PRE		0	0.0	0		0				0.0	
16 Chronic Care	CRH	0	0	0.0	0		0				0.0	
17 Emergency Services	EMG	0	229,378	577.8	22,217		22,522	2,440.4	8,663.3	3,234	16,088.6	
18 Clinical Services	CL		29,914	463.8	2,961		13,494		3,478.0	1,301	5,182.7	
19 Psych, Day & Night Care	PDC	0	0	61.6	827		1,814		410.4	79	637.9	
21 Ambulatory Surgery (PPB)	AMS	0	0	0.0	0		0			0	0.0	
20 Same Day Surgery	SDS	0	143,755	343.2	2,170		2,206		3,971.9	4,513	5,471.1	
22 Labor & Delivery Services	DEL		125,294	504.2	4,790		5,646	3,914.7	596.5		6,278.0	
23 Operating Room	OR		256,462	2,689.2	9,667		44,128	8,101.5	6,789.4		21,234.7	
24 Operating Room Clinic	ORC		0	225.3	0		1,574		452.9		750.2	
25 Anesthesiology	ANS		0	572.6	13		204	519.4	416.5		1,308.0	
26 Laboratory Services	LAB		0	6,549.6	4,340		17,636	6,793.3	4,933.4		17,168.7	
27 Electrocardiography	EKG		7,241	225.2	0		259	492.3	468.6		1,316.8	
28 Interventional Radiology / Cardiovascular	IRC		105,638	1,850.8	4,903		11,555	2,619.4	4,318.2		10,456.0	
29 Radiology-Diagnostic	RAD		107,553	1,494.1	3,362		16,750	2,238.3	3,641.0		9,155.6	
30 CT Scanner	CAT		13,714	617.4	263		1,593	741.7	1,372.2		3,047.6	
31 Radiology-Therapeutic	RAT		32,228	2,370.4	1,383		8,871	175.1	4,425.1		7,339.1	
32 Nuclear Medicine	NUC		41,044	429.9	480		2,108	301.9	968.7		1,998.2	
33 Respiratory Therapy	RES		14,587	691.2	399		3,323	3,807.1	414.3		5,517.6	
34 Pulmonary Function Testing	PUL		4,562	156.1	12		642	2.3	445.9		694.4	
35 Electroencephalography	EEG		12,217	2,883.3	1,235		6,624	552.1	2,583.0		5,083.4	
36 Physical Therapy	PTH		30,121	230.8	128		3,507	1,873.8	336.1		2,993.4	
37 Occupational Therapy	OTH		23,157	43.6	16		0	485.2	64.2		707.2	
38 Speech Language Pathology	STH		0	15.3	51		174	322.3	73.3		511.7	
39 Recreational Therapy	REC	0	0	0.0	0		0				0.0	
40 Audiology	AUD		0	0.0	0		0				0.0	
41 Other Physical Medicine	OPM		0	0.0	0		0				0.0	
42 Renal Dialysis	RDL	0	0	0.0	0		0				0.0	
43 Organ Acquisition	OA		0	0.0	0	0.0	0				0.0	
44 Ambulatory Surgery	AOR		0	0.0	0		0				0.0	
45 Leukopheresis	LEU		0	0.0	0		0				0.0	
46 Hyperbaric Chamber	HYP		0	74.0	0		513		149.3		246.9	
47 Free Standing Emergency	FSE	0	0	0.0	0		0				0.0	
48 Magnetic Resonance Imaging	MRI		16,218	395.7	610		2,681	461.5	529.0		1,534.8	
49 Adolescent Dual Diagnosed	ADD	0	0	0.0	0		0				0.0	
50 Lithotripsy	LIT		0	0.4	0		0	0.1	6.5		8.2	
51 Rehabilitation	RHB	0	0	0.0	0		0				0.0	
52 Observation	OBV	0	0	132.2	0		0	617.9	2,108.3	4,088	4,041.6	
53 Ambulance Services-Redundant	AMR	0	0	0.0	0		0				0.0	
54 Transurethral Microwave Thermotherapy	TMT	0	0	0.0	0		0				0.0	
55 Oncology O/P Clinic	OCL		0	0.0	0		0				0.0	
56 Transurethral Needle Ablation	TNA		0	0.0	0		0				0.0	
57 Pediatric Step-Down	PSD	0	0	0.0	0		0				0.0	
58 340B Clinic Services	CL-340		0	0.0	0		0				0.0	
59 340B Radiology - Therapeutic	RAT-340		0	0.0	0		0				0.0	
60 340B OR Clinic Services	ORC-340		0	0.0	0		0				0.0	
61 340B Laboratory Services	LAB-340		0	0.0	0		0				0.0	
62 340B Drugs	CDS-340		0	0.0	0		0				0.0	
63 Admission Services	ADM					2,581.8	0			17,225		
64 Med/Surg Supplies	MSS				0	1,392.7	0	839.2	555.5		1,829.4	
65 Drugs Sold	CDS				0	6,453.9	0	3,074.6	3,379.3		8,408.3	
E TOTAL		184,254	2,048,108	29,866.3	126,774	10,428.3	309,153	95,102.0	23,319.7	32,233.4	30,439	220,868.6

DEPARTMENTAL EQUIPMENT ALLOWANCE

H2

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER: 210019

		COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	COL 8
	CENTER	COST BASE YEAR PURCHASES	# YRS	CUMULATIVE PURCHASE TOTAL	DEPRECIATION COL 3 / COL 2	MKT VALUE BASE YEAR LEASES	CUMULATIVE LEASES TOTAL	LEASE AMORTIZATION COL 6 / COL 2	DEPR/AMORT TOTAL COL 4 + COL 7
H2A	MIS	12.4	10	2,856.4	285.6	0.0	0.0	0.0	285.6
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	3,801.8	10	18,783.6	1,878.4	0.0	0.0	0.0	1,878.4
H2I	ORC	0.0	10	0.0	0.0	0.0	0.0	0.0	0.0
H2J	AOR	0.0	10	321.3	32.1	0.0	0.0	0.0	32.1
H2K	LAB	394.7	10	3,541.8	354.2	0.0	0.0	0.0	354.2
H2L	IRC	2,149.9	10	8,593.5	859.4	0.0	0.0	0.0	859.4
H2M	RAD	316.6	10	3,523.1	352.3	0.0	0.0	0.0	352.3
H2N	CAT	0.0	6.5	1,522.7	234.3	0.0	0.0	0.0	234.3
H2O	RAT	116.3	10	5,177.5	517.8	0.0	0.0	0.0	517.8
H2P	NUC	0.0	10	1,212.6	121.3	0.0	0.0	0.0	121.3
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	4.5	10	624.4	62.4	0.0	0.0	0.0	62.4
H2T	LL	0.0	10	103.6	10.4	0.0	0.0	0.0	10.4
H2U	MGT	1.2	10	1,072.7	107.3	0.0	0.0	0.0	107.3
H2V	EDP	2,027.0	10	56,292.1	5,629.2	0.0	0.0	0.0	5,629.2
H2W	MRI	96.9	6	735.8	122.6	0.0	0.0	0.0	122.6
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	8,921.3		104,361.1	10,567.2	0.0	0.0	0.0	10,567.2

DISTRIBUTION OF CAPITAL FACILITIES ALLOWANCE

B3 A

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER: 210019

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	5,215	////	////	////	////	////	////	A
B TOTAL DEPRECIATION	RECORDS	30,489.8	////	////	////	////	////	////	B
C CAPITAL INTENSIVE EQUIP DEPR	TOTAL H2	10,567.2	62.4	10.4	107.3	5,629.2	4,757.9	21,134.3	C
D BLDG & GEN EQUIP DEPR	B - C	19,922.6	////	////	////	////	////	19,922.6	D
E BLDG & GEN EQUIP DEPR & INT	A + D	25,137.6	62.4	10.4	107.3	5,629.2	4,757.9	35,704.8	E
F STANDARD UNITS	////	309,153	184,254	2,048,108	150,655	150,655	////	////	F
G ALLOWANCE PER UNIT	E / F	0.08131	0.00034	0.00001	0.00071	0.03736	////	////	G

DISTRIBUTION	CODE	ADJ. SQUARE FOOTAGE BASIS								
1 Med/Surg Acute	MSG	92,136	7,491.7	51.3	3.0	25.4	1,353.7	////	8,905.1	.1
2 Pediatric Acute	PED	3,501	284.7	0.9	0.3	0.7	38.3	////	525.0	2
3 Psychiatric Acute	PSY	8,690	706.6	3.4	0.2	2.6	136.2	////	848.9	3
4 Obstetrics Acute	OBS	4,823	392.2	4.2	0.1	2.1	109.3	////	507.8	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	20,779	1,689.6	2.7	0.6	6.5	359.5	285.6	2,324.4	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	11,206	911.2	////	0.1	1.7	88.0	////	1,000.9	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	22,522	1,831.3	0.0	1.2	7.9	414.9	////	2,255.3	17
18 Clinical Services	CL	13,494	1,097.2	////	0.2	2.5	130.0	////	1,229.8	18
19 Psvch. Day & Night Care	PDC	1,814	147.5	0.0	0.0	0.3	15.3	////	163.1	19
20 Same Day Surgery	SDS	2,206	179.4	0.0	0.7	2.8	148.4	////	331.3	20
21 Labor & Delivery Services	DEL	5,646	459.1	////	0.6	3.2	168.6	////	631.6	21
22 Operating Room	OR	44,128	3,588.1	////	1.3	10.6	556.4	1,878.4	6,034.8	22
23 Operating Room Clinic	ORC	1,574	128.0	////	0.0	0.3	16.9	////	145.2	23
24 Anesthesiology	ANS	204	16.6	////	0.0	0.7	35.0	////	52.2	24
25 Med/Surg Supplies	MSS	0	0.0	////	////	1.0	52.0	////	53.0	25
26 Drugs Sold	CDS	0	0.0	////	////	4.6	241.2	////	245.8	26
27 Laboratory Services	LAB	17,636	1,434.0	////	0.0	8.4	438.2	354.2	2,234.8	27
28 Electrocardiography	EKG	253	20.6	////	0.0	0.7	35.9	////	57.2	28
29 Interventional Radiology / Cardiovascular	IRC	11,535	939.6	////	0.5	4.9	259.2	859.4	2,063.6	29
30 Radiology-Diagnostic	RAD	16,750	1,362.0	////	0.5	4.2	219.7	352.3	1,938.7	30
31 CT Scanner	CAT	1,593	129.5	////	0.1	1.5	79.0	234.3	444.4	31
32 Radiology-Therapeutic	RAT	8,871	721.3	////	0.2	3.3	171.9	517.8	1,414.4	32
33 Nuclear Medicine	NUC	2,108	171.4	////	0.2	0.9	47.5	121.3	341.2	33

DISTRIBUTION OF CAPITAL FACILITIES ALLOWANCE

15 B

INSTITUTION NAME:

Peninsula Regional Medical Center

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER:

210019

DISTRIBUTION		Col. 1	Col. 2	Col. 3	Col. 4	Col. 5	Col. 6	Col. 7	Col. 8		
		ADJ. SQUARE FOOTAGE BASIS	GENERAL	DIETARY	LAUNDRY	COMM.	DATA PROC	DEPART	TOTAL		
34	Respiratory Therapy	RES	3,523	286.5	////	0.1	3.0	157.7	////	447.3	34
35	Pulmonary Function Testing	PUL	642	52.2	////	0.0	0.3	16.8	////	69.3	35
36	Electroencephalography	EEG	6,624	538.6	////	0.1	2.2	117.1	////	658.0	36
37	Physical Therapy	PTH	3,507	285.2	////	0.2	1.6	82.6	////	369.5	37
38	Occupational Therapy	OTH	0	0.0	////	0.1	0.4	20.5	////	21.0	38
39	Speech Language Pathology	STH	174	14.2	////	0.0	0.3	14.8	////	29.2	39
40	Recreational Therapy	REC	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	41
42	Other Physical Medicine	OPM	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	44
45	Leukopheresis	LEU	0	0.0	////	0.0	0.0	0.0	////	0.0	45
46	Hyperbaric Chamber	HYP	513	41.7	////	0.0	0.1	5.6	0.0	47.4	46
47	Free Standing Emergency	FSE	0	0.0	0.0	0.0	0.0	0.0	////	0.0	47
48	Magnetic Resonance Imaging	MRI	2,681	218.0	////	0.1	0.7	37.0	122.6	378.4	48
49	Lithotripsy	LIT	0	0.0	////	0.0	0.0	0.3	0.0	0.3	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	1.9	101.9	////	103.8	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	53
54	Transurethral Needle Ablation	TNA	0	0.0	////	0.0	0.0	0.0	////	0.0	54
55	Podiatric 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	56
57	340B Radiology - Therapeutic	RAT-340	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	58
59	340B Laboratory Services	LAB-340	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	60
I	Subtotal	ABC	309,153	25,138	62	10	107	5,629	4,726	35,673	I
61	Ambulance Services	AMB	0	0.0	////	////	////	////	////	0.0	61
62	Parking	PAR	0	0.0	////	////	////	////	////	0.0	62
63	Doctor's Private Office Rent	DPO	0	0.0	////	////	////	////	////	0.0	63
64	Office & Other Rental	OOD	0	0.0	////	////	////	////	////	0.0	64
65	Retail Operations	REO	0	0.0	////	////	////	////	////	0.0	65
66	Patients Telephones	PTE	0	0.0	////	////	////	////	////	0.0	66
67	Cafeteria	CAF	0	0.0	////	////	////	////	////	0.0	67
68	Day Care Recreation Areas	DEB	0	0.0	////	////	////	////	////	0.0	68
69	Housing	HOU	0	0.0	////	////	////	////	////	0.0	69
70	Research	REG	0	0.0	////	////	////	////	////	0.0	70
71	Nursing Education	RNS	0	0.0	////	////	////	////	////	0.0	71
72	Other Health Profession Education	OHE	0	0.0	////	////	////	////	////	0.0	72
73	Community Health Education	CHH	0	0.0	////	////	////	////	////	0.0	73
74	Post Graduate Medical Ed	PME	0	0.0	////	////	////	////	////	0.0	74
75	Freesstanding Clinic Services	FSC1	0	0.0	////	////	////	////	////	0.0	75
76	Home Health Services	HHC	0	0.0	////	////	////	////	////	0.0	76
77	Outpatient Renal Dialysis	ORD	0	0.0	////	////	////	////	////	0.0	77
78	Skilled Nursing Care	ECF	0	0.0	////	////	////	////	////	0.0	78
79	Laboratory Non-Patient	ULB	0	0.0	////	////	////	////	////	0.0	79
80	Physicians Part B Services	UPB	0	0.0	////	////	////	////	////	0.0	80
81	Certified Nurse Anesthetists	CNA	0	0.0	////	////	////	////	////	0.0	81
82	Physician Support Services	PSS	0	0.0	////	////	////	////	////	0.0	82
83	TBD	TBA2	0	0.0	////	////	////	////	////	0.0	83
84	TBD	TBA3	0	0.0	////	////	////	////	////	0.0	84
85	TBD	TBA4	0	0.0	////	////	////	////	////	0.0	85
86	TBD	TBA5	0	0.0	////	////	////	////	////	0.0	86
87	TBD	TBA6	0	0.0	////	////	////	////	////	0.0	87
88	TBD	TBA7	0	0.0	////	////	////	////	////	0.0	88
89	TBD	TBA8	0	0.0	////	////	////	////	////	0.0	89

II	TOTAL DISTRIBUTED	XYZ	309,153	25,138	62	10	107	5,629	4,726	35,673	II
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THIRD PARTY DIFFERENTIAL

PDA

INSTITUTION NAME: Peninsula Regional Medical Center FISCAL YEAR 6/30/2018
 INSTITUTION NUMBER: 210019

SOURCE	INPATIENT	OUTPATIENT	TOTAL
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CHARGES, DEDUCTIBLES, CBA

		COL 1	COL 2	COL 3		
A	Gross Patient Revenue, HSCRC Regulated	Records/Budget	254,809.4	195,527.1	450,336.5	A
B	Medicare Revenue, HSCRC Regulated	Records/Budget	141,133.9	84,928.3	226,062.2	B
C	Medicaid Revenue, HSCRC Regulated	Records/Budget	7,802.4	2,650.9	10,453.3	C
D	Blue Cross Revenue, HSCRC Regulated	Records/Budget	14,331.7	18,405.3	32,737.0	D
E	MCO Subcontracted Medicare, Medicaid, HSCRC Regulated **	Records/Budget	47,444.6	39,448.8	86,893.4	E
F	Medicare Deductibles Paid by Medicaid, HSCRC Regulated	Records/Budget	//////////	//////////	0.0	F
G	Uncompensated Care, HSCRC Regulated ***	Records/Budget	8,809.1	6,924.4	15,733.5	G
G1	Other Payors Not Eligible for SAAC & Not U.C.	A-B-C-D-E-G	35,287.7	43,169.4	78,457.1	G1

RATIOS, LEVEL III COSTS

H	Ratio of Medicare & Medicaid Charges	Col 3 (B + C) / Col 3 A	//////////	//////////	0.5252	H
I	Ratio of Blue Cross Inpatient Charges	Col 1 D/Col 3 A	0.0318	//////////	//////////	I
II	Ratio of Blue Cross Outpatient Charges	Col 2 D/Col 3 A	//////////	0.0409	//////////	II
J	Ratio of HMO Charges	Col 3 E/Col 3 A	//////////	//////////	0.1930	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	//////////	//////////	0.0349	L
M	Ratio of Other Payors Charges	Col 3 G1/Col 3 A	//////////	//////////	0.1742	M
N	Level III Costs	Schedule MA	//////////	//////////	335,294.3	N

DIFFERENTIAL CALCULATION

O	Gross Revenue HSCRC Regulated	*	//////////	//////////	365,660.1	O
P	Payor Differential	1 - (Col 3 O/N)	//////////	//////////	0.0906	P

*. O = N/ (1-.06H + .0225I + .02II + .06J + .02K + L+.02M) - per HSCRC

** Detail on Supplemental Schedule 5

*** See Supplemental Schedule 4 for reconciliation to financial statements

SUPPLEMENTAL SCHEDULE 4

Peninsula Regional Medical Center

Detail of MCO Regulated Revenue

For The Fiscal Year Ended June 30, 2018

MCO Revenue	Inpatient	Outpatient	Total
AETNA GOLDEN M/C OPT OUT PLAN	\$ 41.1	\$ 89.7	\$ 130.8
AETNA OPEN M/C OPT OUT PLAN	58.0	61.2	119.2
AETNA MEDICARE PPO PLAN OPTOUT	1,538.9	960.6	2,499.5
UHC COMMUNITY PLAN	3,267.4	2,419.7	5,687.1
MARYLAND PHYSICIANS CARE	2,308.1	2,573.7	4,881.8
PRIORITY PARTNERS	23,811.5	23,927.7	47,739.2
AMERIHEALTH CARITAS	24.4	96.1	120.5
JAI MEDICAL		13.7	13.7
HUMANA MC ADVANTAGE	2,081.2	668.1	2,749.3
SECURE HORIZON M/C		1.2	1.2
BRAVO BY ELDER HELATH M/C		8.7	8.7
GATEWAY HLTH MC ASSURED		3.2	3.2
CIGNA HEALTHSPRING	362.2	108.8	471.0
MEDICAID MCO CATCH ALL	17.0	11.6	28.6
COMMERCIAL CATCH ALL	5.3	6.4	11.7
JHHP ADVANTAGE MD	2,895.9	1,668.1	4,564.0
AMERI GROUP	2,549.1	1,256.4	3,805.5
HEALTH OPTIONS HIGHMARK DE	848.8	989.0	1,837.8
MEDSTAR FAMILY CHOICE	28.5	58.0	86.5
PURCHASED CARE		0.6	0.6
WICOMICO DETENTION CTR	27.9	44.1	72.0
SOMERSET COUNTY DETENTION		10.5	10.5
EMR PET BEACON VALUE OPTIONS		0.3	0.3
WORCESTER COUNTY DETENTION	4.9	1.9	6.8
MEDICARE ADVANTAGE	217.8	38.0	255.8
ANTHEM HEALTHKEEPERS	251.0	140.5	391.5
HORIZON MEDICARE ADVANTAGE	13.1	12.3	25.4
OPTIMA FAMILY CARE	49.0	19.1	68.1
UNIVERSITY OF MD HLTH PLAN	2,339.5	2,246.0	4,585.5
VALUE OPTIONS MD PMHS	3,757.6	1,452.0	5,209.6
VIRGINIA PREMIER HEALTH PLAN HM	18.2	33.4	51.6
WEXFORD HEALTH SOURCES INC	44.9	193.8	238.7
UHC MEDICARE COMP OPT OUT	676.4	316.7	993.1
KAISER PERMANENTE STATE OF MD	8.9		8.9
MEDICAID MARYLAND	198.0	17.7	215.7
			-
Total MCO Revenue	\$ 47,444.6	\$ 39,448.8	\$ 86,893.4

REVENUE CENTER RATE SUMMARY

M

INSTITUTION NAME:
INSTITUTION NUMBER:

Peninsula Regional Medical Center
210012

FISCAL YEAR

6/30/2018

DESCRIPTION	CODE	COL 1	COL 2	COL 3	COL 4	COL 5	COL 6	COL 7	COL 8	CFA		COL 11
										BLDG & GENRL EQUIPMENT	DEPART-MENTAL	
UNITS OF MEASURE	DIRECT EXPENSES	PAT CARE OVERHEAD EXPENSES	OTHER OVERHEAD EXPENSES	N/A	PHYSICIAN SUPPORT EXPENSES	RESIDENT INTERN EXPENSES	LEVEL I	LEVEL I	LEVEL I	LEVEL I	LEVEL II	
A1 Med/Surg Acute	MSG	59,187	35,693.3	10,264.5	9,205.3	//////	0.0	0.0	55,164.2	8,850.8	54.3	64,069.3
2 Pediatric Acute	PED	1,031	1,025.5	352.4	265.8	//////	0.0	0.0	1,643.7	323.7	1.2	1,968.7
3 Psychiatric Acute	FSY	3,895	3,643.7	1,049.9	939.9	//////	0.0	0.0	5,633.6	845.3	3.5	6,482.4
4 Obstetrics Acute	OBS	4,789	2,926.0	598.4	749.1	//////	0.0	0.0	4,273.4	503.6	4.3	4,781.3
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	5,782	9,085.2	1,822.2	2,325.0	//////	0.0	0.0	13,232.5	2,035.5	288.9	15,556.9
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	5,555	2,353.9	688.2	607.4	//////	0.0	0.0	3,649.5	1,009.8	0.1	4,650.4
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	839,835	11,103.8	2,315.2	3,042.6	//////	0.0	0.0	16,461.6	2,254.1	1.2	18,716.9
17 Clinical Services	CL	341,645	3,478.0	851.1	973.7	//////	0.0	0.0	5,302.8	1,229.7	0.2	6,532.7
18 Psych. Day & Night Care	PDC	2,192	410.4	131.3	111.0	//////	0.0	0.0	652.7	163.1	0.0	815.8
19 Same Day Surgery	SDS	9,025	3,971.9	342.4	1,283.6	//////	0.0	0.0	5,597.9	330.6	0.7	5,929.3
20 Labor & Delivery Services	DEL	80,614	4,513.2	631.9	1,278.4	//////	0.0	0.0	6,423.5	630.9	0.6	7,055.1
21 Operating Room	OR	1,246,090	14,890.9	3,024.5	3,811.6	//////	0.0	0.0	21,727.1	4,155.1	1,879.7	27,761.8
22 Operating Room Clinic	ORC	120,282	452.9	100.4	214.3	//////	0.0	0.0	767.6	145.2	0.0	912.8
23 Anesthesiology	ANS	1,330,283	935.9	75.2	327.2	//////	0.0	0.0	1,338.3	52.2	0.0	1,390.5
24 Laboratory Services	LAB	15,338,070	11,728.7	1,780.1	4,057.9	//////	0.0	0.0	17,566.7	1,880.6	354.2	19,801.5
25 Electrocardiography	EKG	764,667	960.9	42.5	344.0	//////	0.0	0.0	1,347.4	57.2	0.0	1,404.6
26 Interventional Radiology / Cardiovascular	IRC	236,917	6,937.6	1,057.2	2,703.6	//////	0.0	0.0	10,698.4	1,203.7	859.9	12,762.0
27 Radiology-Diagnostic	RAD	781,260	5,879.3	1,194.5	2,294.0	//////	0.0	0.0	9,367.8	1,585.8	352.9	11,306.5
28 CT Scanner	CAT	1,353,224	2,113.9	171.8	832.5	//////	0.0	0.0	3,118.3	210.0	234.3	3,562.6
29 Radiology-Therapeutic	RAT	1,417,324	4,600.2	776.2	2,132.9	//////	0.0	0.0	7,509.3	896.5	517.9	8,923.7
30 Nuclear Medicine	NUC	243,243	1,270.6	199.3	533.8	//////	0.0	0.0	2,003.6	219.8	121.5	2,344.9
31 Respiratory Therapy	RES	3,520,172	4,221.4	267.4	1,156.7	//////	0.0	0.0	5,645.6	447.2	0.1	6,092.8
32 Pulmonary Function Testing	PUL	238,792	448.2	51.9	210.5	//////	0.0	0.0	710.5	69.3	0.0	779.9
33 Electroencephalography	EEG	420,300	3,135.1	707.3	1,363.9	//////	0.0	0.0	5,206.4	658.0	0.1	5,864.5
34 Physical Therapy	PTH	348,718	2,210.0	219.6	633.2	//////	0.0	0.0	3,062.8	369.3	0.2	3,432.2
35 Occupational Therapy	OTH	123,264	549.5	21.6	152.5	//////	0.0	0.0	723.6	20.9	0.1	744.6
36 Speech Language Pathology	STH	77,202	395.6	12.4	115.6	//////	0.0	0.0	523.5	29.2	0.0	552.7
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	1,270	149.3	32.8	70.6	//////	0.0	0.0	252.6	47.4	0.0	300.0
44 Free Standing Emergency	FSE	0	0.0	0.0	0.0	//////	0.0	0.0	0.0	0.0	0.0	0.0
45 Magnetic Resonance Imaging	MRI	297,012	990.5	211.5	368.4	//////	0.0	0.0	1,570.4	255.7	122.7	1,948.8
46 Lithotripsy	LIT	170	6.6	0.0	1.7	//////	0.0	0.0	8.4	0.3	0.0	8.7
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	112,802	2,726.4	15.0	1,393.9	//////	0.0	0.0	4,135.3	103.8	0.0	4,239.1
49 Ambulance Services-Rebundled	AMR	0	0.0	0.0	0.0	//////	0.0	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	17,223	//////	2,581.8	1,035.7	//////	//////	//////	3,617.5	//////	//////	3,617.5
60 Med/Surg Supplies	MSS	30,439	40,677.5	//////	1,392.7	//////	//////	//////	42,540.1	53.0	//////	42,593.1
61 Drugs Sold	CDS	30,439	29,337.1	6,453.9	2,354.0	//////	//////	//////	38,145.0	245.8	//////	38,390.8
62						//////						
B TOTAL		29,402,513	212,823.1	39,437.3	47,361.3		0.0	0.0	299,621.6	30,874.1	4,798.5	335,294.3

REVENUE CENTER RATE SUMMARY

INSTITUTION NAME:
INSTITUTION NUMBER:

Peninsula Regional Medical Center
210019

FISCAL YEAR

6/30/2018

DESCRIPTION	CODE	OFC		LEVEL III	PAYOR DIFFERENTIAL	LEVEL IV	CROSS SUBSIDY	MISC ADJ	HSCRC ADJ	ADJUST LEVEL IV	AVERAGE RATES
		Direct of Sets	(Discontinued) Difference								
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		64,069.3	5,802.4	69,871.7				69,871.7	1,180,524.1
2 Pediatric Acute	PED	0.0		1,968.7	178.3	2,147.0				2,147.0	2,082,414.7
3 Psychiatric Acute	PSY	0.0		6,482.4	587.1	7,069.5				7,069.5	1,815,014.2
4 Obstetrics Acute	OBS	0.0		4,781.3	433.0	5,214.3				5,214.3	1,088,807.0
5 Definitive Observation	DEF	0.0		0.0	0.0	0.0				0.0	0.0000
6 Med/Surg intensive Care	MIS	0.0		15,556.9	1,408.9	16,965.8				16,965.8	2,934,238.5
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		4,650.4	421.2	5,071.6				5,071.6	947,085.1
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		18,716.9	1,695.1	20,412.0				20,412.0	24,304.7
17 Clinical Services	CL	0.0		6,532.7	591.6	7,124.3				7,124.3	20,852.9
18 Psych. Day & Night Care	PDC	0.0		815.8	73.9	889.7				889.7	405,890.3
19 Same Day Surgery	SDS	0.0		5,929.3	537.0	6,466.3				6,466.3	716,482.1
20 Labor & Delivery Services	DEL	0.0		7,055.1	638.9	7,694.0				7,694.0	95,442.2
21 Operating Room	OR	0.0		27,761.8	2,514.2	30,276.0				30,276.0	24,296.8
22 Operating Room Clinic	ORC	0.0		912.8	82.7	995.5				995.5	8,276.4
23 Anesthesiology	ANS	0.0		1,390.5	125.9	1,516.4				1,516.4	1,139.9
24 Laboratory Services	LAB	0.0		19,801.5	1,793.3	21,594.8				21,594.8	1,407.9
25 Electrocardiography	EKG	0.0		1,404.6	127.2	1,531.8				1,531.8	2,003.2
26 Interventional Radiology / Cardiovascular	IRC	0.0		12,762.0	1,155.8	13,917.8				13,917.8	58,745.6
27 Radiology-Diagnostic	RAD	0.0		11,306.5	1,024.0	12,330.5				12,330.5	15,782.8
28 CT Scanner	CAT	0.0		3,562.6	322.6	3,885.2				3,885.2	2,871.1
29 Radiology-Therapeutic	RAT	0.0		8,923.7	808.2	9,731.9				9,731.9	6,866.4
30 Nuclear Medicine	NUC	0.0		2,344.9	212.4	2,557.3				2,557.3	10,513.3
31 Respiratory Therapy	RES	0.0		6,092.8	551.8	6,644.6				6,644.6	1,887.6
32 Pulmonary Function Testing	PUL	0.0		779.9	70.6	850.5				850.5	3,561.5
33 Electroencephalography	EEG	0.0		5,864.5	531.1	6,395.6				6,395.6	15,216.7
34 Physical Therapy	PTH	0.0		3,432.2	310.8	3,743.0				3,743.0	10,733.7
35 Occupational Therapy	OTH	0.0		744.6	67.4	812.0				812.0	6,587.3
36 Speech Language Pathology	STH	0.0		552.7	50.1	602.8				602.8	7,808.7
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		300.0	27.2	327.2				327.2	257,676.2
44 Free Standing Emergency	FSE	0.0		0.0	0.0	0.0				0.0	0.0000
45 Magnetic Resonance Imaging	MRI	0.0		1,948.8	176.5	2,125.3				2,125.3	7,155.7
46 Lithotripsy	LIT	0.0		8.7	0.8	9.5				9.5	55,654.4
47 Rehabilitation	RHB	0.0		0.0	0.0	0.0				0.0	0.0000
48 Observation	OBV	0.0		4,239.1	383.9	4,623.0				4,623.0	40,983.2
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		3,617.5	327.6	3,945.1				3,945.1	229,057.2
60 Med/Surg Supplies	MSS	0.0		42,593.1	3,857.4	46,450.5				46,450.5	1,526,017.1
61 Drugs Sold	CDS	0.0		38,390.8	3,476.9	41,867.7				41,867.7	1,375,460.4
62		0.0									
B TOTAL		0.0		335,294.3	30,365.8	365,660.1	0.0	0.0	0.0	365,660.1	//////////

OVERHEAD EXPENSE SUMMARY

OES

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210019

		DISTRIBUTE TO:				
		Physician Part B Centers Sch P2	Data Processing Sch DP1	General Service Centers Sch C1 - C14		
	EXPENSES	TOTAL				
A	Dietary Services	3,373.6	0.0	3,373.6	A	
B	Laundry & Linen	1,409.3	0.0	1,409.3	B	
C	Social Services	2,570.3	0.0	2,570.3	C	
D	Purchasing & Stores	2,961.0	0.0	2,961.0	D	
E	Plant Operations	14,887.2	0.0	14,887.2	E	
F	Housekeeping	5,888.1	0.0	5,888.1	F	
G	Central Services & Supply	1,384.5	0.0	1,384.5	G	
H	Pharmacy	5,667.1	0.0	5,667.1	H	
I	General Accounting	2,461.5	0.0	2,461.5	I	
J	Patient Accounts	7,333.1	0.0	7,333.1	J	
K	Hospital Administration	20,277.6	0.0	20,277.6	K	
L	Medical Records	3,142.3	0.0	3,142.3	L	
M	Medical Staff Administration	1,574.1	0.0	1,574.1	M	
N	Nursing Administration	2,846.2	0.0	2,846.2	N	
O	Data Processing	20,252.4	0.0	20,252.4	O	
P	Organ Acquisition Overhead	0.0		0.0	P	
Q	Totals	96,028.3	0.0	20,252.4	75,775.9	Q

UNREGULATED SERVICES

UR01

FSC1

INSTITUTION NAME: Peninsula Regional Medical Center
 INSTITUTION NUMBER: 210019

FISCAL YEAR 6/30/2018

	VOLUME DATA	FISCAL YEAR UNITS
A	Visits	175,701

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

FREESTANDING CLINIC SERVICES

SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES, REVENUES	EXPENSE REVENUE PER UNIT
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FISCAL YEAR DATA

		RECORDS	14,224.6	13,034.1	27,258.7	XXXXX	B
B	FISCAL YEAR EXPENSES	SCH. OA	83.7	XXXXX	83.7	XXXXX	C
C	ALLOCATION FROM CAFETERIA, PARKING, ETC.	////	XXXXXXXX	XXXXX	XXXXX	XXXXX	D
D	ALLOCATION FROM GENERAL SERVICE CENTERS	////	XXXXXXXX	XXXXX	XXXXX	XXXXX	///
///	COST CENTER Col 5	COL. 6 CODE	////	XXXXXXXX	XXXXX	XXXXX	///
D01	General Accounting	FIS	136.1	21.0	157.1	XXXXX	D01
D02	Leases & Rentals	LBA	0.0	960.8	960.8	XXXXX	D02
D03	Malpractice Insurance	MAL	0.0	2.0	2.0	XXXXX	D03
D04	Hospital Administration	MGT	1,040.4	253.0	1,293.4	XXXXX	D04
D05	Purchasing & Stores	PUR	140.1	48.7	188.8	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
D15					0.0	XXXXX	D15
D16					0.0	XXXXX	D16
E	Capital Facilities Allowance	Records		0.0	0.0	XXXXX	E
F	FISCAL Year Adjusted Expenses	B+C+D+E	15,624.9	14,319.6	29,944.5	0.1704	F

FISCAL YEAR PROFIT (LOSS)

		RECORDS	XXXXXXXX	XXXXX	8,941.6	XXXXX	G
G	FISCAL YEAR REVENUE	G - F	XXXXXXXX	XXXXX	(21,002.9)	XXXXX	H
H	PROFIT (LOSS)						

FTE DATA

		RECORDS	185.0		I
I	FISCAL YEAR HOURS WORKED / 2080				

UNREGULATED SERVICES

UR03

ORD

INSTITUTION NAME: Peninsula Regional Medical Center
 INSTITUTION NUMBER: 210019

FISCAL YEAR 6/30/2018

	VOLUME DATA	FISCAL YEAR UNITS
A	Treatments	13

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

OUTPATIENT RENAL DIALYSIS

SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES, REVENUES	EXPENSE REVENUE PER UNIT
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FISCAL YEAR DATA

B	FISCAL YEAR EXPENSES		RECORDS	9.3	7.7	17.0	XXXXX	B
C	ALLOCATION FROM CAFETERIA, PARKING, ETC.		SCH. OA	0.0	XXXXX	0.0	XXXXX	C
D	ALLOCATION FROM GENERAL SERVICE CENTERS		////	XXXXXXXX	XXXXX	XXXXX	XXXXX	D
///	COST CENTER Col 5	COL. 6 CODE	////	XXXXXXXX	XXXXX	XXXXX	XXXXX	///
D01	General Accounting	FIS		0.1	0.0	0.1	XXXXX	D01
D02	Hospital Administration	MGT		0.6	0.2	0.8	XXXXX	D02
D03	Purchasing & Stores	PUR		0.1	0.0	0.1	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
D15						0.0	XXXXX	D15
D16						0.0	XXXXX	D16
E	Capital Facilities Allowance		Records		0.0	0.0	XXXXX	E
F	FISCAL Year Adjusted Expenses		B+C+D+E	10.1	7.9	18.0	1.3881	F

FISCAL YEAR PROFIT (LOSS)

G	FISCAL YEAR REVENUE		RECORDS	XXXXXXXX	XXXXX	1.4	XXXXX	G
H	PROFIT (LOSS)		G - F	XXXXXXXX	XXXXX	(16.6)	XXXXX	H

FTE DATA

I	FISCAL YEAR HOURS WORKED / 2080		RECORDS	0.1				I
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UNREGULATED SERVICES

UR05

ULB

INSTITUTION NAME: Peninsula Regional Medical Center
 INSTITUTION NUMBER: 210019

FISCAL YEAR 6/30/2018

	VOLUME DATA	FISCAL YEAR UNITS
A	CAP, WMU, 1982 Ed.	7,521,246

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

LABORATORY NON-PATIENT

SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES, REVENUES	EXPENSE REVENUE PER UNIT
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FISCAL YEAR DATA

B	FISCAL YEAR EXPENSES	RECORDS	4,410.1	2,587.8	6,997.9	XXXXX	B
C	ALLOCATION FROM CAFETERIA, PARKING, ETC.	SCH. OA	33.2	XXXXX	33.2	XXXXX	C
D	ALLOCATION FROM GENERAL SERVICE CENTERS	////	XXXXXXXX	XXXXX	XXXXX	XXXXX	D
///	COST CENTER Col 5	COL. 6 CODE	////	XXXXXXXX	XXXXX	XXXXX	///
D01	Depreciation & Amortization	DEP	0.0	180.3	180.3	XXXXX	D01
D02	General Accounting	FIS	35.0	5.4	40.4	XXXXX	D02
D03	Housekeeping	HKP	23.8	12.8	36.6	XXXXX	D03
D04	Interest Long Term	ILT	0.0	32.7	32.7	XXXXX	D04
D05	Leases & Rentals	LEA	0.0	113.7	113.7	XXXXX	D05
D06	Malpractice Insurance	MAL	0.0	3.0	3.0	XXXXX	D06
D07	Hospital Administration	MGT	267.1	65.0	332.1	XXXXX	D07
D08	Other Insurance	OIN	0.0	0.9	0.9	XXXXX	D08
D09	Plant Operations	POP	23.2	69.5	92.7	XXXXX	D09
D10	Purchasing & Stores	PUR	36.0	12.5	48.5	XXXXX	D10
D11					0.0	XXXXX	D11
D12					0.0	XXXXX	D12
D13					0.0	XXXXX	D13
D14					0.0	XXXXX	D14
D15					0.0	XXXXX	D15
D16					0.0	XXXXX	D16
E	Capital Facilities Allowance	Records		0.0	0.0	XXXXX	E
F	FISCAL Year Adjusted Expenses	B+C+D+E	4,828.4	3,083.6	7,912.0	0.0011	F

FISCAL YEAR PROFIT (LOSS)

G	FISCAL YEAR REVENUE	RECORDS	XXXXXXXX	XXXXX	13,416.3	XXXXX	G
H	PROFIT (LOSS)	G - F	XXXXXXXX	XXXXX	5,504.3	XXXXX	H

FTE DATA

I	FISCAL YEAR HOURS WORKED / 2080	RECORDS	73.5				I
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UNREGULATED SERVICES

UR06

UPB

INSTITUTION NAME:

Peninsula Regional Medical Center

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER:

210019

	VOLUME DATA	FISCAL YEAR UNITS
A	# of FTEs	107.0

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

PHYSICIANS PART B SERVICES

SOURCE	WAGES, SALARIES & FRINGE BENEFITS	OTHER EXPENSES	TOTAL EXPENSES, REVENUES	EXPENSE REVENUE PER UNIT
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FISCAL YEAR DATA

B	FISCAL YEAR EXPENSES		RECORDS	34,851.2	7,980.8	42,832.0	XXXXX	B
C	ALLOCATION FROM CAFETERIA, PARKING, ETC.		SCH. OA	48.4	XXXXX	48.4	XXXXX	C
D	ALLOCATION FROM GENERAL SERVICE CENTERS		////	XXXXXXXX	XXXXX	XXXXX	XXXXX	D
///	COST CENTER Col 5	COL. 6 CODE	////	XXXXXXXX	XXXXX	XXXXX	XXXXX	///
D01	Malpractice Insurance	MAL		0.0	1,101.0	1,101.0	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
D15						0.0	XXXXX	D15
D16						0.0	XXXXX	D16
E	Capital Facilities Allowance		Records		0.0	0.0	XXXXX	E
F	FISCAL Year Adjusted Expenses		B+C+D+E	34,899.6	9,081.8	43,981.4	411.0410	F

FISCAL YEAR PROFIT (LOSS)

G	FISCAL YEAR REVENUE		RECORDS	XXXXXXXX	XXXXX	20,707.3	XXXXX	G
H	PROFIT (LOSS)		G - F	XXXXXXXX	XXXXX	(23,274.1)	XXXXX	H

FTE DATA

I	FISCAL YEAR HOURS WORKED / 2080		RECORDS	107.0			I
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SUPPLEMENTAL SCHEDULE 9

UR6-A

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

INSTITUTION NAME: Peninsula Regional Medical Center

FISCAL YEAR

6/30/2018

INSTITUTION NUMBER: 210019

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
Code	Physician Description	Wages, Salaries, & Fringe Benefits	Other Expenses	Total Expenses	Revenue	Hospital Based	FTEs
1	General Practice	\$ -	\$ 2.5	\$ 2.5	\$ -		-
2	General Surgery	\$ -	\$ (26.6)	\$ (26.6)	\$ -		-
5	Anesthesiology	-	3,818.0	3,818.0	-	X	-
6	Cardiology	-	35.5	35.5	-		-
8	Family Practice	3,745.2	229.4	3,974.6	2,148.8		17.4
10	Gastroenterology	2,403.8	83.8	2,487.6	2,133.3		5.0
13	Neurology	864.7	61.8	926.5	289.9		3.0
14	Neurosurgery	3,464.9	112.4	3,577.3	2,094.3		6.4
16	Obstetrics & Gynecology	-	68.8	68.8	-		-
17	Hospice & Palliative Care	-	95.0	95.0	-		-
18	Ophthalmology	-	6.5	6.5	-		-
22	Pathology	-	16.4	16.4	-	X	-
26	Psychiatry	-	-	-	-		-
29	Pulmonary Disease	4,178.0	222.9	4,400.9	2,432.9		16.2
30	Diagnostic Radiology	93.6	-	93.6	-	X	-
37	Pediatric Medicine	53.2	44.8	98.0	33.4		-
44	Infectious Disease	-	2.3	2.3	-		-
46	Endocrinology	829.6	53.4	883.0	563.7		4.1
72	Pain Management	1,155.2	62.9	1,218.1	961.3		4.6
78	Cardiac Surgery	5,079.5	174.2	5,253.7	2,599.8		10.3
90	Medical Oncology	4,575.7	145.8	4,721.5	4,755.6		8.2
92	Radiation Oncology	192.8	2.6	195.4	-		-
93	Emergency Medicine	-	3,436.4	3,436.4	-	X	-
XX	Hospitalist	8,263.4	438.7	8,702.1	2,694.3	X	31.8
ZZ	Other - Med Staff Directors	-	(5.7)	(5.7)	-		-
Total		\$ 34,899.6	\$ 9,081.8	\$ 43,981.4	\$ 20,707.3	Combined	107.0

Unregulated Services Summary

INSTITUTION NAME Peninsula Regional Medical Center

INSTITUTION NUMBER

0019

BASE YEAR

6/18

SCHEDULE

ENTITY NAME AND ADDRESS

NATURE OF SERVICE

UR - 1

Milford Street Diagnostic Center
Bldg. 4, Ste. 106 Milford Street
Salisbury, MD 21804

FREESTANDING CLINIC

East Park Diagnostic Center
1336 Belmont Ave
Suite 501A
Salisbury, MD 21804

Pediatric Endocrinology
100 E. Carroll St
Salisbury, MD 21801

Millsboro Family Medicine and Family Lab
30265 Commerce Drive
Millsboro, DE 19966

Laurel Family Medicine/Lab
30668 Sussex Highway
Laurel, DE 19956-4421

Ocean Pines Family Medicine, Home Scripts and
Family Lab
11101 Cathage Road
Berlin, MD 21811

Snow Hill Family Medicine/Lab
428 W Market Street
Snow Hill, MD 21863

Hospitalist
100 E. Carroll Street
Salisbury, MD 21801

Family Medicine Salisbury
145 E. Carroll Street
Suite 101-102
Salisbury, MD 21801

Medical Oncology - Salisbury
100 E. Carroll Street
Salisbury, MD 21801

Richard A. Henson Cancer Institute Ocean Pines
11105 Cathage Rd
Berlin, MD 21811

Peninsula Regional Gastroenterology Medicine

Unregulated Services Summary

INSTITUTION NAME Peninsula Regional Medical Center
 INSTITUTION NUMBER 0019 BASE YEAR 6/18

SCHEDULE ENTITY NAME AND ADDRESS NATURE OF SERVICE

560 Riverside Drive
 Suite A206
 Salisbury, MD 21801

Peninsula Regional Gastroenterology Berlin
 10344 Old Ocean City Blvd
 Suite 1
 Berlin, MD 21811

Peninsula Regional Neurosurgery
 540 Snow Hill Road
 Salisbury, MD 21801

Peninsula Regional CV Surgical
 100 E. Carroll Street
 3rd Floor, West Tower
 Salisbury, MD 21801

Peninsula Regional Pain Management
 264 Tilghman Road
 Salisbury, MD 21804

Peninsula Regional Pulmonary & Critical Care
 100 E. Carroll Street
 PRMC Station 379
 Salisbury, MD 21801

Peninsula Regional Endocrinology/Lab
 1415 S. Division Street
 Salisbury, MD 21804-7291

Peninsula Regional Neurology
 100 E. Carroll Street
 Salisbury, MD 21801

Peninsula Breast Center/Lab
 804 Snow Hill Road
 Salisbury, MD 21801

Peninsula Surgery Center
 804 Snow Hill Road
 Salisbury, MD 21801

UR - 3

Outpatient Dialysis
 100 E. Carroll Street
 Salisbury, MD 21801

OUTPATIENT
 RENAL DIALYSIS

Unregulated Services Summary

INSTITUTION NAME Peninsula Regional Medical Center

INSTITUTION NUMBER

0019

BASE YEAR

6/18

SCHEDULE

ENTITY NAME AND ADDRESS

NATURE OF SERVICE

UR - 5

Milford Street Diagnostic Center
Bldg. 4, Ste. 106 Milford Street
Salisbury, MD 21804

LABORATORY
NON-PATIENT

East Park Diagnostic Center
1336 Belmont Ave
Suite 501A
Salisbury, MD 21804

Millsboro Family Medicine and Family Lab
30265 Commerce Dr.
Millsboro, DE 19966

Ocean Pines Family Medicine, Home Scripts and
Family Lab
11101 Cathage Road
Berlin, MD 21811

Unregulated Services Summary

INSTITUTION NAME Peninsula Regional Medical Center

INSTITUTION NUMBER

0019

BASE YEAR

6/18

SCHEDULE	ENTITY NAME AND ADDRESS	NATURE OF SERVICE
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UR - 6

Pediatric Endocrinology
100 E. Carroll St
Salisbury, MD 21801

PART B PHYSICIANS

Millsboro Family Medicine and Family Lab
30265 Commerce Drive
Millsboro, DE 19966

Laurel Family Medicine/Lab
30668 Sussex Highway
Laurel, DE 19956-4421

Snow Hill Family Medicine/Lab
428 W Market Street
Snow Hill, MD 21863

Hospitalist
100 E. Carroll Street
Salisbury, MD 21801

Ocean Pines Family Medicine, Home Scripts and
Family Lab
11101 Cathage Road
Berlin, MD 21811

Medical Oncology - Salisbury
100 E. Carroll Street
Salisbury, MD 21801

Richard A. Henson Cancer Institute Ocean Pines
11105 Cathage Rd
Berlin, MD 21811

Island Medical Center/Lab
6295 Teal Lane
Chincoteague, VA 23336

Peninsula Regional Gastroenterology Medicine
560 Riverside Drive
Suite A206
Salisbury, MD 21801

Unregulated Services Summary

INSTITUTION NAME Peninsula Regional Medical Center

INSTITUTION NUMBER 0019

BASE YEAR

6/18

SCHEDULE ENTITY NAME AND ADDRESS NATURE OF SERVICE

Peninsula Regional Neurosurgery
540 Snow Hill Road
Salisbury, MD 21801

Peninsula Regional CV Surgical
100 E. Carroll Street
Salisbury, MD 21801

Peninsula Regional Pulmonary & Critical Care
100 E. Carroll Street
PRMC Station 379
Salisbury, MD 21801

Peninsula Regional Endocrinology/Lab
1415 S. Division Street
Salisbury, MD 21804-7291

Peninsula Regional Family Medicine Salisbury
145 E. Carroll Street
Suite 101-102
Salisbury, MD 21801

Peninsula Regional Pain Management
264 Tilghman Road
Salisbury, MD 21804

Peninsula Regional Neurology
100 E. Carroll Street
Salisbury, MD 21801

Peninsula Breast Center
804 Snow Hill Road
Salisbury, MD 21801

Peninsula Surgery Center
804 Snow Hill Road
Salisbury, MD 21801

ANNUAL COST SURVEY

ACS

INSTITUTION NAME: Peninsula Regional Medic FISCAL YEAR 6/30/2018

INSTITUTION NUMBER: 210019

COL 1

COL 2

	CATEGORY	COSTS	PERCENT	
A	Salaries & Wages	128,654.3	38.28%	A
B	Fringe Benefits	35,519.7	10.57%	B
C	Depreciation & Amortization	28,666.3	8.53%	C
C01	Operating Leases	1,823.5	0.54%	C01
D	Interest Expense	5,215.0	1.55%	D
E	Medical & Surgical Supplies	38,070.2	11.33%	E
F	IV Solutions and Pharmacy	33,924.2	10.09%	F
G	Laundry, Linen, Uniforms	1,269.5	0.38%	G
H	Films & Solutions	955.6	0.28%	H
I	Blood, Plasmanate, Albumin	1,717.8	0.51%	I
J	Contracted Services	35,115.1	10.45%	J
K	Professional Fees	11,507.4	3.42%	K
L	Agency Nurses	834.9	0.25%	L
M	Malpractice Insurance	2,524.5	0.75%	M
N	All Other Insurance	147.6	0.04%	N
O	Telephone	981.2	0.29%	O
P	Utilities & Water	2,501.4	0.74%	P
Q	Food	1,959.1	0.58%	Q
R	Printing, Office Supplies, Copying, Postage	1,369.4	0.41%	R
S	Chemical, Solutions, Lubrication, Gases	3,329.1	0.99%	S
T	Other (Detail over 20% of supply cost)	41.5	0.01%	T
U	Total	336,127.3	100.00%	U

TRANSACTIONS WITH RELATED ENTITIES

TRE

INSTITUTION NAME: Peninsula Regional Medical Center

BASE YEAR 6/30/2018

INSTITUTION NUMBER: 210019

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	Peninsula Regional Foundation		511,209	I	Admin/Accounting Services
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					
17					
18					
19					
20					

Standby Costs - Trauma Physicians

SBC - I

Peninsula Regional Medical Center

Hourly or Salary Based Arrangement (Payroll Based)

Fiscal Year: 6/30/2018

	Col. 1	Col. 2	Col. 3	Col. 4	Col. 5	Col. 6	Col. 7	Col. 8	Col. 9	Col. 10	Col. 11	
	Specialty	Total Trauma Hours	Availability Hours	Supervision & Admin Hours	Payments for Availability	Payments for Supervision & Admin	% Inpatient Hours	% Outpatient Hours	Prof. Organiz. Membership	CME Costs	Malpractice Insurance	Total Trauma Standby Costs
A	Trauma Surgeon	-	-	-	-	-	0.00%	0.00%	-	-	-	
A1		-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -
A2		-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -
B	Orthopedic Surgeon	-	-	-	-	-	0.00%	0.00%	-	-	-	
B1		-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -
B2		-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -
C	Neurosurgeon	-	-	-	-	-	0.00%	0.00%	-	-	-	
C01		-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -
C02		-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -
D	Anesthesiologist	-	-	-	-	-	0.00%	0.00%	-	-	-	
D01		-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -
D02		-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -

Standby Costs - Trauma Physicians

SBC - II

Peninsula Regional Medical Center

Minimum Guaranteed Arrangement (Contract Based)

Fiscal Year: 6/30/2018

	Col. 1	Col. 2	Col. 3	Col. 4	Col. 5	Col. 6	Col. 7	Col. 8	Col. 9	Col. 10	Col. 11	Col. 12
Specialty	Total Trauma Hours	Availability Hours	Supervision & Admin Hours	Act. Min Guaranteed AM	Payments for Supervision & Admin	% Inpatient Hours	% Outpatient Hours	Prof. Organiz. Membership	CME Costs	Malpractice Insurance	Total Trauma Standby Costs	Prof. Service Billed (Paid)
A Trauma Surgeon	-	-	-	-	-	0.00%	0.00%	-	-	-	-	-
A1	-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -	-
A2	-	-	-	-	-	0.00%	0.00%	-	-	-	-	-
B Orthopedic Surgeon	-	-	-	-	-	0.00%	0.00%	-	-	-	-	-
B1	-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -	-
B2	-	-	-	-	-	0.00%	0.00%	-	-	-	-	-
C Neurosurgeon	-	-	-	-	-	0.00%	0.00%	-	-	-	-	-
C01	-	-	-	-	-	0.00%	0.00%	-	-	-	\$ -	-
C02	-	-	-	-	-	0.00%	0.00%	-	-	-	-	-
D Anesthesiologist	-	-	-	-	-	0.00%	0.00%	-	-	-	-	-
D01	8,760.000	8,760.000	-	400,000.000	-	0.00%	0.00%	-	-	-	\$ 400,000.0	-
D02	-	-	-	-	-	0.00%	0.00%	-	-	-	-	-

SUMMARY

Hospital Name:
Hospital Number:

Peninsula Regional Medical Center
210019

Fiscal Year: 6/30/2018

Col. 1

A	Trauma Director	\$	38,250
B	Trauma Department		334,286
C	Trauma Protocol		451,154
D	Specialized Trauma Staff		407,654
E	Education & Training Cost		78
F	Special Equipment		468,501
G	Total	\$	1,699,923

MIEMMS Regulatory Trauma Costs

MTC - A

SCHEDULE A - TRAUMA DIRECTOR

Hospital Name: Peninsula Regional Medical Center
 Hospital Number: 210019

Fiscal Year: 6/30/2018

Col. 1

A	Salary Costs	\$	38,250
B	-		-
C	-		-
D	-		-
E	-		-
F	-		-
G	Total	\$	38,250

MIEMMS Regulatory Trauma Costs

MTC - B

SCHEDULE B - TRAUMA DEPARTMENT

Hospital Name: Peninsula Regional Medical Center
 Hospital Number: 210019

Fiscal Year: 6/30/2018

Col. 1

A	Trauma Coordinator	\$	109,420
B	Trauma Assistant		-
C	Trauma Registrar(s)		201,500.00
D	Tech. & Prof. Fees		3,000.00
E	Dues & Licences		9,960.00
F	Travel & Seminars		22,200.00
G	Other		(11,794.00)
H	Total	\$	334,286

MIEMMS Regulatory Trauma Costs**MTC - C****SCHEDULE C - TRAUMA PROTOCOL**Hospital Name:
Hospital Number:Peninsula Regional Medical Center
210019

Fiscal Year: 6/30/2018

Col. 1

A	Respiratory Therapist	\$	55,562
B	Lab Technician		31,530.00
C	Radiology Technician		77,376.00
D	ED Nurse		46,837.00
E	ED Tech		40,892.00
F	OR/Anesthesia Tech.		31,560.00
G	Nurse Manager		99,131.00
H	Patient Access Registrar		21,429.00
I	Other		46,837.00
J	Total	\$	451,154

MIEMMS Regulatory Trauma Costs**MTC - D****SCHEDULE D - SPECIALIZED TRAUMA STAFF**Hospital Name:
Hospital Number:Peninsula Regional Medical Center
210019

Fiscal Year: 6/30/2018

Col. 1

A	ICU	\$	-
B	Nursing		-
C	Technical Staff		365,446.00
D	Social Work		-
E	Other Staff		42,208.00
F	Total	\$	407,654

MIEMMS Regulatory Trauma Costs

MTC - E

SCHEDULE E - EDUCATION AND TRAININGHospital Name:
Hospital Number:Peninsula Regional Medical Center
210019

Fiscal Year: 6/30/2018

Col. 1

A	Instructor & Supplies	\$	78
B	Trauma Nurse Orientation (16 hrs.)		-
C	Continuing Education		-
D	ATLAS Certification		-
E	Other		-
F	Total	\$	78

MIEMMS Regulatory Trauma Costs

MTC - F

SCHEDULE F - SPECIALIZED EQUIPMENTHospital Name:
Hospital Number:Peninsula Regional Medical Center
210019

Fiscal Year: 6/30/2018

Col. 1

A	Emergency Department	\$	280,583
B	OR, Recovery & ICU		177,921.00
C	Ancillary Services		9,997.00
D	Post Acute Services		-
E	Transportation Services		-
F	Other		-
G	Total	\$	468,501

SUPPLEMENTAL SCHEDULE 8

Gross Patient Revenue Reconciliation

For The Fiscal Year Ended June 30, 2018

Institution Name: Peninsula Regional Medical Center

Institution Number: 210019

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

Section I

TOTAL GROSS PATIENT REVENUE

Line #		Col 1 Inpatient	Col 2 Outpatient	Col 3 Total
1	Total In-State Revenue	\$ 202,052.4	\$ 156,003.9	\$ 358,056.3
2	Total Out-State Revenue	\$ 52,757.0	\$ 39,523.2	\$ 92,280.2
3	Total Gross Patient Revenue	\$ 254,809.4	\$ 195,527.1	\$ 450,336.5

Section II

TOTAL MEDICARE REVENUE

	Col 1 In-State I/P Revenue	Col 2 Out-State I/P Revenue	Col 3 In-State O/P Revenue	Col 4 Out-State O/P Revenue	Col 5 Total Revenue	
4	Medicare FFS Revenue	\$ 108,559.2	\$ 32,563.4	\$ 62,617.7	\$ 19,712.8	\$ 223,453.1
5	Medicare Non-FFS Revenue	\$ 5,398.8	\$ 3,872.9	\$ 3,153.9	\$ 1,801.0	\$ 14,226.6
6	Total Medicare Revenue	\$ 113,958.0	\$ 36,436.3	\$ 65,771.6	\$ 21,513.8	\$ 237,679.7

SUPPLEMENTAL SCHEDULE 7

Peninsula Regional Medical Center

For the Fiscal Year Ended June 30, 2018

Name of Outpatient Service	Description of Services Provided	Physical Location/Address	Regulated/ Unregulated
Operating Room	Outpatient Surgery	Principal Hospital	Regulated
Same Day Surgery	PACU - recovery room	Principal Hospital	Regulated
Observation Service	Observation services	Principal Hospital	Regulated
Emergency	Emergency room	Principal Hospital	Regulated
Lithotripsy	Lithotripsy	Principal Hospital	Regulated
Laboratory	Clinical lab	Principal Hospital	Regulated
Unregulated Lab	Clinical lab for specimens drawn at non-principal hospital locations tested at Principal Hospital	Ocean Pines Lab 11101 Cathage Road Berlin, MD 21811	Unregulated
Unregulated Lab	Clinical lab for specimens drawn at non-principal hospital locations tested at Principal Hospital	Milford Street Diagnostic Center Bldg. 4, Ste. 106 Milford Street Salisbury, MD 21804	Unregulated
Unregulated Lab	Clinical lab for specimens drawn at non-principal hospital locations tested at Principal Hospital	East Park Diagnostic Center 1336 Belmont Avenue Suite 501A Salisbury, MD 21804	Unregulated
Unregulated Lab	Clinical lab for specimens drawn at non-principal hospital locations tested at Principal Hospital	Millsboro Diagnostic Center 30265 Commerce Drive Millsboro, DE 19966	Unregulated
Unregulated Lab	Clinical lab for specimens drawn at non-principal hospital locations tested at Principal Hospital	Princess Anne Laboratory 30434 Mt. Vernon Road Princess Anne, MD 21853	Unregulated
Unregulated Lab	Clinical lab for specimens drawn at non-principal hospital locations tested at Principal Hospital	Peninsula Regional Family Medicine Salisbury Lab Services 145 E. Carroll Street Salisbury MD 21801	Unregulated
Unregulated Lab	Clinical lab for specimens drawn at non-principal hospital locations tested at Principal Hospital	Peninsula Regional Gastroenterology Berlin Lab Services 10344 Old Ocean City Blvd, Suite 1 Berlin, MD 21811	Unregulated
Unregulated Lab	Clinical lab for specimens drawn at non-principal hospital locations tested at Principal Hospital	Peninsula Regional Family Medicine Laurel Lab Services 30668 Sussex Highway Laurel, DE 19956-4421	Unregulated
Unregulated Lab	Clinical lab for specimens drawn at non-principal hospital locations tested at Principal Hospital	Peninsula Regional Family Medicine Ocean Pines Lab Services 11101 Cathage Road Berlin, MD 21811	Unregulated
Unregulated Lab	Clinical lab for specimens drawn at non-principal hospital locations tested at Principal Hospital	Peninsula Regional Family Medicine Snow Hill Lab Services 428 West Market Street Snow Hill, MD 21863	Unregulated
Laboratory	Blood replacement	Principal Hospital	Regulated
Electrocardiology	Electrocardiology	Principal Hospital	Regulated
EEG	Neurological diagnostics - sleep lab	Principal Hospital	Regulated
Medical Oncology - Salisbury	Physician office-Medical Oncology	Principal Hospital	Unregulated
Medical Oncology - Ocean Pines	Physician office-Medical Oncology	Richard A. Henson Cancer Institute Ocean Pines 11105 Cathage Road Berlin, MD 21811	Unregulated
Radiology - Therapeutic	Radiation Oncology	Principal Hospital	Regulated
Radiology - Diagnostic	General x-ray diagnostic	Principal Hospital	Regulated

SUPPLEMENTAL SCHEDULE 7

Peninsula Regional Medical Center

For the Fiscal Year Ended June 30, 2018

Name of Outpatient Service	Description of Services Provided	Physical Location/Address	Regulated/ Unregulated
MRI Scanner	Magnetic resonance imaging	Principal Hospital	Regulated
Radiology - Diagnostic	Ultrasound	Principal Hospital	Regulated
Nuclear Medicine	Nuclear medicine	Principal Hospital	Regulated
Interventional Rad/Cardio	Radiology special procedures -arteriograms	Principal Hospital	Regulated
CT Scanner	C/T Scanning	Principal Hospital	Regulated
Radiology - Diagnostic	Vascular lab - provides venous and arterial studies	Principal Hospital	Regulated
Clinic Services	Lung Cancer clinic - clinical care time related to treatment of thoracic cancers	Principal Hospital	Regulated
Clinic professional fees	Physician office - lung cancer clinic - nurse practitioner visits	Principal Hospital	Unregulated
Med Surg Supplies	Medical surgical supplies	Principal Hospital	Regulated
Drugs	Pharmacy	Principal Hospital	Regulated
Drugs	PRMC Homescripts Community Pharmacy - Ocean Pines	PRMC Homescripts - Delmarva Health Pavilion 11101 Cathage Road Berlin, MD 21811	Unregulated
Anesthesiology	Anesthesiology	Principal Hospital	Regulated
Respiratory Therapy	Respiratory care	Principal Hospital	Regulated
Physical Therapy	Physical therapy	Principal Hospital	Regulated
Pulmonary	Pulmonary function lab	Principal Hospital	Regulated
Radiology - Diagnostic	Echocardiography	Principal Hospital	Regulated
Interventional Rad/Cardio	Cardiac catheterization lab	Principal Hospital	Regulated
Interventional Rad/Cardio	Electrophysiology lab - electrical studies of the heart	Principal Hospital	Regulated
Family Medicine Millsboro	Physician office - family medicine services	Peninsula Regional Family Medicine Millsboro 30265 Commerce Drive Millsboro, DE 19966	Unregulated
Family Medicine Laurel	Physician office - family medicine services	Laurel Primary Care 30668 Sussex Highway Laurel, DE 19956	Unregulated
Speech Therapy	Speech Therapy	Principal Hospital	Regulated
Occupational Therapy	Occupational Therapy	Principal Hospital	Regulated
Clinic Services	Cardiac rehabilitation phase II - medically monitored exercise	Principal Hospital	Regulated
Clinic Services	Diabetes education program	Principal Hospital	Regulated
Clinic Services	Ostomy care	Principal Hospital	Regulated
Clinic Services	Perfusion services - chemo/non-chemo drug administration and blood transfusion	Principal Hospital	Regulated
Clinic Services	Apheresis services	Principal Hospital	Regulated
Hospitalist	Physician office - hospitalist services	Principal Hospital	Unregulated
Neurology	Physician office - neurology services	Principal Hospital	Unregulated
Clinic Services	Wound care - clinical care time involved in treating non-healing wounds	Principal Hospital	Regulated
Hyperbaric chamber	Hyperbaric chamber	Principal Hospital	Regulated
Gastroenterology practice	Physician office - gastroenterology services	Peninsula Regional Gastroenterology Medicine 560 Riverside Drive, Suite A206 Salisbury, MD 21801	Unregulated

SUPPLEMENTAL SCHEDULE 7

Peninsula Regional Medical Center

For the Fiscal Year Ended June 30, 2018

Name of Outpatient Service	Description of Services Provided	Physical Location/Address	Regulated/ Unregulated
Family Medicine Ocean Pines	Physician office - family medicine services	Ocean Pines Primary Care 11101 Cathage Road Berlin, MD 21811	Unregulated
Milford St diagnostic center	General x-ray diagnostic	Milford Street Diagnostic Center Bldg. 4, Ste. 106 Milford Street Salisbury, MD 21804	Unregulated
Family Medicine Snow Hill	Physician office - family medicine services	Snow Hill Primary Care 428 W Market Street Snow Hill, MD 21863	Unregulated
Family Medicine Chincoteague	Physician office - family medicine services	Island Medical Center 6295 Teal Lane Chincoteague, VA 23336	Unregulated
Clinic Services	Oncology clinic - clinical care time involved with facility component of treating Gyn cancers	Principal Hospital	Regulated
Clinic Services	Palliative care clinic - clinical care time involved with facility component related to alleviating symptoms of disease	Principal Hospital	Regulated
Clinic Services	Oncology clinic - clinical care time involved with facility component of treating urology cancers	Principal Hospital	Regulated
Clinic Services	Oncology clinic - clinical care time involved with facility component of treating liver cancers	Principal Hospital	Regulated
Infant & Pediatric service	Physician office - pediatric endo and neuro evaluation and management services	Principal Hospital	Unregulated
Clinic Services	Cancer Survivor clinic - clinical care time involved with facility component of cancer survivors	Principal Hospital	Regulated
Endocrinology Practice	Physician office - endocrinology services	Peninsula Endocrinology 1415 S. Division Street, Suite A Salisbury, MD 21804	Unregulated
Neurosurgery Practice	Physician office - neurosurgery services	Peninsula Regional Neurosurgery 540 Snow Hill Road Salisbury, MD 21804	Unregulated
Cardiovascular Surgery Practice	Physician office - cardiovascular surgery services	Principal Hospital	Unregulated
Pulmonology Practice	Physician office - pulmonology services	Principal Hospital	Unregulated
Psychiatric Day/Night	Day psychiatric program	Principal Hospital	Regulated
Outpatient Renal Dialysis	Outpatient dialysis service	Principal Hospital	Unregulated
Family Medicine Salisbury	Physician office - family medicine services	Peninsula Regional Family Medicine Salisbury 145 E. Carroll Street Salisbury, MD 21801	Unregulated
Pain Management Practice	Physician office - pain management services	Peninsula Regional Pain Management 264 Tighman Road Salisbury, MD 21804	Unregulated
Peninsula Breast Center	Breast diagnostic center	Peninsula Breast Center 804 Snow Hill Road Salisbury, MD 21801	Unregulated
Gastroenterology practice	Physician office - gastroenterology services	Peninsula Regional Gastroenterology Berlin 10344 Old Ocean City Blvd, Suite 1 Berlin, MD 21811	Unregulated
Peninsula Surgery Center	Endoscopies	Peninsula Surgery Center 804 Snow Hill Road Salisbury, MD 21801	Unregulated