

EXHIBIT 1

<u>Table Number</u>	<u>Table Title</u>	<u>Instructions</u>
Table A	Physical Bed Capacity Before and After Project	All applicants whose project impacts any nursing unit, regardless of project type or scope, must complete Table A.
Table B	Departmental Gross Square Feet	All applicants, regardless of project type or scope, must complete Table B for all departments and functional areas affected by the proposed project.
Table C	Construction Characteristics	All applicants proposing new construction or renovation must complete Table C.
Table D	Site and Offsite Costs Included and Excluded in Marshall Valuation Costs	All applicants proposing new construction or renovation must complete Table D.
Table E	Project Budget	All applicants, regardless of project type or scope, must complete Table E.
Table F	Statistical Projections - Entire Facility	Existing facility applicants must complete Table F. All applicants who complete this table must also complete Tables G and H.
Table G	Revenues & Expenses, Uninflated - Entire Facility	Existing facility applicants must complete Table G. The projected revenues and expenses in Table G should be consistent with the volume projections in Table F.
Table H	Revenues & Expenses, Inflated - Entire Facility	Existing facility applicants must complete Table H. The projected revenues and expenses in H should be consistent with the projections in Tables F and G.
Table I	Statistical Projections - New Facility or Service	Applicants who propose to establish a new facility, existing facility applicants who propose a new service, and applicants who are directed by MHCC staff must complete Table I. All applicants who complete this table must also complete Tables J and K.
Table J	Revenues & Expenses, Uninflated - New Facility or Service	Applicants who propose to establish a new facility and existing facility applicants who propose a new service and any other applicant who completes a Table I must complete Table J. The projected revenues and expenses in Table J should be consistent with the volume projections in Table I.
Table K	Revenues & Expenses, Inflated - New Facility or Service	Applicants who propose to establish a new facility and existing facility applicants who propose a new service and any other applicant that completes a Table I must complete Table K. The projected revenues and expenses in Table K should be consistent with the projections in Tables I and J.
Table L	Manpower	All applicants, regardless of project type or scope, must complete Table L.

TABLE A. PHYSICAL BED CAPACITY BEFORE AND AFTER PROJECT

INSTRUCTION: Identify the location of each nursing unit (add or delete rows if necessary) and specify the room and bed count before and after the project in accordance with the definition of physical capacity noted below. Applicants should add columns and recalculate formulas to address rooms with 3 and 4 bed capacity. See additional instruction in the column to the right of the table.

NOTE: Physical capacity is the total number of beds that could be physically set up in space without significant renovations. This should be the maximum operating capacity under normal, non-emergency circumstances and is a physical count of bed capacity, rather than a measure of staffing capacity. A room with two headwalls and two sets of gasses should be counted as having capacity for two beds, even if it is typically set up and operated with only one bed. A room with one headwall and one set of gasses is counted as a private room, even if it is large enough from a square footage perspective to be used as a semi-private room, since renovation/construction would be required to convert it to semi-private use. If the hospital operates patient rooms that contain no headwalls or a single headwall, but are normally used to accommodate one or more than one patient (e.g., for psychiatric patients), the physical capacity of such rooms should be counted as they are currently used.

Before the Project							After Project Completion						
Hospital Service	Location (Floor/Wing)*	Licensed Beds: 7/1/201_	Based on Physical Capacity				Hospital Service	Location (Floor/Wing)*	Based on Physical Capacity				
			Room Count			Bed Count			Room Count	Bed Count			
			Private	Semi-Private	Total Rooms	Physical Capacity							
ACUTE CARE							ACUTE CARE						
General Medical/Surgical*					0	0	General Medical/Surgical*				0	0	
Med Surg Oncology	E900	24	10	16	26	42	Med/Surg	6	34	0	34	34	
Med Surg Trauma	E800	24	9	17	26	43	Med/Surg	7	33	0	33	33	
General Medical/Surgical	E700	24	10	16	26	42	Med/Surg	8	33	0	33	33	
PCRU Extended	E500	12	3	7	10	17	Med/Surg	9	33	0	33	33	
Post Coronary Recovery Unit	E400	24	4	11	15	26							
SUBTOTAL Gen. Med/Surg*		108	36	67	103	170	SUBTOTAL Gen. Med/Surg*		133	0	133	133	
ICU/CCU	300	24	24	0	24	24	ICU/CCU	5	32	0	32	32	
CCU	K400	10	10	0	10	10		0	0	0	0		
Other (Specify/add rows as needed)		0	0	0	0	0		0	0	0	0		
TOTAL MSGA		142	70	67	137	204	TOTAL MSGA		165	0	165	165	
Obstetrics	K300	18	21	0	21	21	Obstetrics	2	22	0	22	22	
Obstetrics	K200	18	21	0	21	21							
Pediatrics	E600	8	0	6	6	12	Pediatrics	1	1	0	1	1	
Psychiatric	E400	28	0	18	18	38	Psychiatric	4	28	0	28	28	
TOTAL ACUTE		214	112	91	203	296	TOTAL ACUTE		216	0	216	216	
NON-ACUTE CARE							NON-ACUTE CARE						
Dedicated Observation**		0	0	0	0	0	Dedicated Observation**	1	20	0	20	20	
Rehabilitation (MWPH)		15	15	0	15	15	Rehabilitation (MWPH)	2	15	0	15	15	
Comprehensive Care		0	0	0	0	0	Comprehensive Care		0	0	0	0	
Other (Specify/add rows as needed)		0	0	0	0	0	Other (Specify/add rows as needed)		0	0	0	0	
TOTAL NON-ACUTE		15	15	0	15	15	TOTAL NON-ACUTE		35	0	35	35	
HOSPITAL TOTAL		229	127	91	218	311	HOSPITAL TOTAL		251	0	251	251	

Additional Instruction

Calculate the sum of all General Medical/Surgical rows

Calculate the sum of Med/Surg Subtotal, ICU/CCU, and other physical capacity

Ensure that Total includes Total MSGA and Obstetrics, Pediatrics, and Psych rows

Calculate the sum of all Non-Acute Care rows

Ensure that Hospital Total includes Total Acute and Total Non-acute rows

* Include beds dedicated to gynecology and addictions, if unit(s) is separate for acute psychiatric unit

** Include services included in the reporting of the "Observation Center". Service furnished by the hospital on the hospital's promise, including use of a bed and periodic monitoring by the hospital's nursing or other staff, which are reasonable and necessary to determine the need for a possible admission to the hospital as an inpatient; Must be ordered and documented in writing, given by a medical practitioner.

TABLE B. DEPARTMENTAL GROSS SQUARE FEET AFFECTED BY PROPOSED PROJECT

INSTRUCTION: Add or delete rows if necessary. See additional instruction in the column to the right of the table.

DEPARTMENT/FUNCTIONAL AREA	DEPARTMENTAL GROSS SQUARE FEET				
	Current	To be Added Thru New Construction	To Be Renovated	To Remain As Is	Total After Project Completion
					0
ACUTE PATIENT CARE					0
ACUTE CARE INPT. UNITS		90,840			90,840
INTENSIVE CARE		22,794			22,794
POST-PARTUM		17,454			17,454
NEONATAL INTENSIVE CARE UNIT		11,921			11,921
PEDIATRICS		400			400
MT. WASHINGTON PEDIATRICS		13,149			13,149
					0
DIAGNOSTICS & TREATMENT					0
SURGERY		33,137			33,137
CARDIAC CATH LAE		4,676			4,676
GI - ENDOSCOPY		1,903			1,903
ADULT ED		27,151			27,151
PEDS ED		1,757			1,757
TRAUMA		5,165			5,165
UNIVERSAL CARE / PRE-POST		19,516			19,516
CLINICAL DECISION UNIT		9,904			9,904
					0
IMAGING		18,135			18,135
NEUROLOGY/CARDIOLOGY		6,854			6,854
LABOR & DELIVERY		14,648			14,648
C-SECTION		3,735			3,735
WOMENS CENTER		10,082			10,082
DOMESTIC VIOLENCE CENTER		2,235			2,235
DIALYSIS		2,344			2,344
PT/OT		3,461			3,461
RESP THERAPY		1,222			1,222
					0
CLINICAL SUPPORT					0
LABORATORY / PATHOLOGY		12,895			12,895
PHARMACY		5,220			5,220
					0
NON CLINICAL SUPPORT					0
DIETARY / DINING		13,333			13,333
MATERIALS / BIO MED / EVS		16,176			16,176
CENTRAL STERILE		8,004			8,004
FACILITIES & SUPPORT SERVICES		8,545			8,545
IT / TELECOM		9,616			9,616
					0
OFFICES & EDUCATION					0
OFFICE / ADMINISTRATION		21,318			21,318
ON CALL		3,643			3,643
CONFERENCE CENTER		5,256			5,256
RESIDENT / FACULTY		15,341			15,341
					0
PUBLIC SPACES		11,630			11,630
CIRCULATION		98,817			98,817
					0
MECHANICAL/ELECTRICAL		74,503			74,503
					0
BEHAVIORAL HEALTH					0
CLINICAL PROGRAMS		2,580			2,580
ACUTE BEHAVIORAL HEALTH		20,488			20,488
ASSESSMENT STABILIZATION		3,444			3,444
					0
AMBULATORY/CANCER CLINICAL PROGRAMS					0
MT WASHINGTON OUTPATIENT		1,922			1,922
CANCER CENTER		12,105			12,105
AMBULATORY CLINICS		11,241			11,241
					0
SHAFTS / EXTERIOR WALL THICKNESS		25,452			25,452
					0
Total		704,012			704,012

TABLE C. CONSTRUCTION CHARACTERISTICS

INSTRUCTION: If project includes non-hospital space structures (e.g., parking garages, medical office buildings, or energy plants), complete an additional Table C for each structure.

	NEW CONSTRUCTION	NEW CONSTRUCTION - CUP	NEW CONSTRUCTION - TUNNEL	RENOVATION
BASE BUILDING CHARACTERISTICS			Check if applicable	
Class of Construction (for renovations the class of the building being renovated)*				
Class A				
Class B				
Class C				
Class D				
Type of Construction/Renovation*				
Low				
Average				
Good				
Excellent				
Number of Stories				
*As defined by Marshall Valuation Service				
PROJECT SPACE	List Number of Feet, if applicable			
TOTAL	704,012	43,199	2,617	
Concourse	160,139	20,784	2,617	
First Floor	184,922	22,415		
Second Floor	95,986			
Third Floor	72,404			
Fourth Floor	30,632			
Fifth Floor	30,632			
Sixth Floor	30,632			
Seventh Floor	30,632			
Eighth Floor	30,632			
Ninth Floor	30,632			
Roof	6,769			
Average Square Feet	64,001	21,600	2,617	
Perimeter in Linear Feet	Linear Feet			
Concourse	2,169	714	126	
First Floor	2,590	714		
Second Floor	2,275			
Third Floor	1,723			
Fourth Floor	937			
Fifth Floor	937			
Sixth Floor	937			
Seventh Floor	937			
Eighth Floor	937			
Ninth Floor	937			
Roof	484			
Total Linear Feet				
Average Linear Feet				

TABLE C. CONSTRUCTION CHARACTERISTICS

INSTRUCTION : If project includes non-hospital space structures (e.g., parking garges, medical office buildings, or energy plants), complete an additional Table C for each structure.

	NEW CONSTRUCTION	NEW CONSTRUCTION - CUP	NEW CONSTRUCTION - TUNNEL	RENOVATION
Wall Height (floor to eaves)	Feet			
Concourse	17	22	17	
First Floor	18	22		
Second Floor	14			
Third Floor	24			
Fourth Floor	14			
Fifth Floor	14			
Sixth Floor	14			
Seventh Floor	14			
Eighth Floor	14			
Ninth Floor	14			
Roof	30			
Average Wall Height				
OTHER COMPONENTS				
Elevators	List Number			
Passenger	10	0	0	
Freight	10	1	0	
Sprinklers	Square Feet Covered			
Wet System	704,012	43,199	2,617	
Dry System	0	0	0	
Other	Describe Type			
Type of HVAC System for proposed project	VAV / REHEAT	VAV / REHEAT	VAV / REHEAT	
	PRECAST CONCRETE AND NATURAL STONE WITH GLASS CURTAINWALL AND TERRA COTTA WALL SYSTEM	PRECAST CONCRETE AND NATURAL STONE WITH GLASS CURTAINWALL AND TERRA COTTA WALL SYSTEM	PRECAST CONCRETE AND NATURAL STONE WITH GLASS CURTAINWALL AND TERRA COTTA WALL SYSTEM	
Type of Exterior Walls for proposed project				

TABLE D. CONSTRUCTION COSTS

INSTRUCTION: If project includes non-hospital space structures (e.g., parking garages, medical office buildings, or energy plants), complete an additional Table D for each structure.

	NEW CONSTRUCTION COSTS - Hospital	NEW CONSTRUCTION COSTS - CUP	RENOVATION COSTS
SITE PREPARATION COSTS			
Normal Site Preparation	\$419,978	\$477,602	
Utilities from Structure to Lot Line			
Subtotal included in Marshall Valuation Costs			
Site Demolition Costs	\$1,034,400		
Storm Drains	\$1,551,600		
Rough Grading	\$3,620,400		
Hillside Foundation	\$1,551,600		
Paving			
Exterior Signs	\$517,200		
Landscaping	\$930,960		
Walls			
Yard Lighting			
Canopy	\$3,620,400		
Foundation Drainage/Dewatering	\$310,320		
LEED Silver Premium	\$11,421,709		
Redundant Electric Service	\$2,586,000		
Redundant Water Service	\$310,320		
Premium for Concrete Frame Construction	\$2,161,453		
OVHD Bridge	\$1,500,000		
Sediment Control & Stabilization	\$103,440		
Helipad	\$1,551,600		
Deep Foundations	\$517,200		
Pilings	\$517,200		
Premium for Paying Prevailing Wage	\$25,356,771	\$869,738	
Premium for Paying Prevailing Wage	\$46,664	\$53,067	
Subtotal On-Site excluded from Marshall Valuation Costs	\$59,209,237	\$922,805	
OFFSITE COSTS			
Roads	\$517,200		
Utilities	\$5,792,640		
Jurisdictional Hook-up Fees	\$517,200		
Other <i>(Specify/add rows if needed)</i>			
Subtotal Off-Site excluded from Marshall Valuation Costs	\$6,827,040	\$0	
TOTAL Estimated On-Site and Off-Site Costs <u>not</u> included in Marshall Valuation Costs	\$66,036,277	\$922,805	\$0
TOTAL Site and Off-Site Costs included and excluded from Marshall Valuation Service*	\$66,036,277	\$922,805	\$0

*The combined total site and offsite cost included and excluded from Marshall Valuation Service should typically equal the estimated site preparation cost

TABLE E. PROJECT BUDGET

INSTRUCTION: Estimates for Capital Costs (1.a-e), Financing Costs and Other Cash Requirements (2.a-g), and Working Capital Startup Costs (3) must reflect current costs as of the date of application and include all costs for construction and renovation. Explain the basis for construction cost estimates, renovation cost estimates, contingencies, interest during construction period, and inflation in an attachment to the application. See additional instruction in the column to the right of the table.

NOTE: Inflation should only be included in the Inflation allowance line A.1.e. The value of donated land for the project should be included on Line A.1.a as a use of funds and on line B.8 as a source of funds

	Hospital Building	CUP	Total
A. USE OF FUNDS			
1. CAPITAL COSTS			
a. Land Purchase / Value (See Comment 1)	\$11,972,775	\$377,225	\$12,350,000
b. New Construction			
(1) Building	\$276,046,707	\$8,697,383	\$284,744,090
(2) Fixed Equipment			\$0
(3) Site and Infrastructure	\$16,603,282	\$530,668	\$17,133,951
(4) Architect/Engineering Fees	\$15,676,523	\$501,048	\$16,177,571
(5) Permits (Building, Utilities, Etc.)	\$10,590,589	\$338,493	\$10,929,082
SUBTOTAL	\$318,917,102	\$10,067,591	\$328,984,693
c. Renovations			
(1) Building			\$0
(2) Fixed Equipment (not included in construction)			\$0
(3) Architect/Engineering Fees			\$0
(4) Permits (Building, Utilities, Etc.)			\$0
SUBTOTAL	\$0	\$0	\$0
d. Other Capital Costs			
(1) Movable Equipment (See Comment 2)	\$126,420,566	\$32,496,000	\$158,916,566
(2) Contingency Allowance (See Comment 3)	\$28,582,481	\$1,417,519	\$30,000,000
(3) Gross interest during construction period (See Comment 4)	\$36,385,339	\$3,376,661	\$39,762,000
(4) Other (Specify) UMMS PM, Builder's Risk, Commissioning/Testing, Warehousing, Testing, Traffic Study, Davis Langdon, CM Pricing, Scheduling, Helipad, Survey, Risk Assessment, Code, review, ICRA, MET Testing, Curtainwall Testing, Legal, Office Consolidation, Enabling, Equipment Planning, IT Design, Offsite Improvements, IT Design, Original site leave behind (See Comment 5)	\$20,079,220		\$20,079,220
SUBTOTAL	\$211,467,606	\$37,290,180	\$248,757,786
TOTAL CURRENT CAPITAL COSTS	\$542,357,482	\$47,734,997	\$590,092,479
e. Inflation Allowance	\$23,469,012	\$2,355,508	\$25,824,521
TOTAL CAPITAL COSTS	\$565,826,494	\$50,090,506	\$615,917,000

Additional instruction for cost categories

These costs should be consistent with the Marshall Valuation Service definition of Group 1 equipment: Permanent equipment, installed on or attached to the building, part of a general contract, and included in calculator costs.

Ensure that SUBTOTAL includes all categories under 1.b.

Ensure that SUBTOTAL includes all categories under 1.c.

Calculate sum of all categories under 1.d.

Ensure that TOTAL CURRENT CAPITAL COSTS includes all SUBTOTALS above

Inflation should only be included in this category

Ensure that TOTAL CAPITAL COSTS includes TOTAL CURRENT CAPITAL COSTS and Inflation Allowance

TABLE E. PROJECT BUDGET

INSTRUCTION: Estimates for Capital Costs (1.a-e), Financing Costs and Other Cash Requirements (2.a-g), and Working Capital Startup Costs (3) must reflect current costs as of the date of application and include all costs for construction and renovation. Explain the basis for construction cost estimates, renovation cost estimates, contingencies, interest during construction period, and inflation in an attachment to the application. See additional instruction in the column to the right of the table.

NOTE: Inflation should only be included in the Inflation allowance line A.1.e. The value of donated land for the project should be included on Line A.1.a as a use of funds and on line B.8 as a source of funds

	Hospital Building	CUP	Total
2. Financing Cost and Other Cash Requirements			
a. Loan Placement Fees	\$3,795,039	\$335,961	\$4,131,000
b. Bond Discount			\$0
c. Legal Fees	\$917,814	\$82,186	\$1,000,000
d. Non-Legal Consultant Fees	\$826,033	\$73,967	\$900,000
e. Liquidation of Existing Debt			\$0
f. Debt Service Reserve Fund	\$13,573,398	\$1,201,602	\$14,775,000
g. Other (Specify) Purchase of leasehold and development rights of third parties	\$13,308,310	\$1,191,690	\$14,500,000
SUBTOTAL	\$32,420,594	\$2,885,406	\$35,306,000
3. Working Capital Startup Costs (See Comment 6)			\$0
TOTAL USES OF FUNDS	\$598,247,089	\$52,975,911	\$651,223,000
B. Sources of Funds (See Comment 7)			
1. Cash			\$0
2. Philanthropy (to date and expected)			\$0
3. Authorized Bonds (See Comment 8)			\$206,760,000
4. Interest Income from bond proceeds listed in #3 (See Comment 6)			\$16,113,000
5. Mortgage			\$0
6. Working Capital Loans (See Comment 5)			\$0
7. Grants or Appropriations			
a. Federal			\$0
b. State (See Comment 9)			\$208,000,000
c. Local (See Comment 9)			\$208,000,000
8. Other, includes Land Donation (rounding)			\$12,350,000
TOTAL SOURCES OF FUNDS			\$651,223,000
Annual Lease Costs (if applicable)			
1. Land			\$0
2. Building			\$0
3. Major Movable Equipment			\$0
4. Minor Movable Equipment			\$0
5. Other (Specify/add rows if needed)			\$0
Describe the terms of the lease(s) below, including information on the fair market value of the item(s), and the number of years, annual cost, and the interest rate for the lease.			

Calculate sum of all categories under 2.

Start up costs are costs incurred before opening a facility or new service that under generally accepted accounting principles are not chargeable as operating expense or maintenance.

Ensure that TOTAL USES OF FUNDS includes TOTAL CAPITAL COSTS, SUBTOTAL under A.2., and Working Capital Startup Costs

Identify and explain the sources, plans, and the hospital's experience regarding fundraising goals under the response to the Viability standard in Section XX of the CON application.

\$

Include the value of any donated land for the project in this category

Calculate sum of all categories under B; Note that TOTAL SOURCES OF FUNDS should match TOTAL USES OF FUNDS

TABLE F1. STATISTICAL PROJECTIONS - ENTIRE FACILITY - DIMENSIONS

INSTRUCTION : Complete this table for the entire facility, including the proposed project. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). For sections 4 & 5, the number of beds and occupancy percentage should be reported on the basis of licensed beds. In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.						
Indicate CY or FY	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
1. DISCHARGES (excludes newborn)										
a. General Medical/Surgical*	4,783	6,082	6,285	6,371	6,446	6,542	6,673	7,440	8,206	8,973
b. ICU/CCU	1,871	1,521	1,572	1,593	1,612	1,636	1,669	1,861	2,052	2,244
Total MSGA	6,654	7,603	7,857	7,964	8,058	8,178	8,342	9,300	10,259	11,217
c. Pediatric	60	36	37	37	37	37	37	35	34	32
d. Obstetric	2,287	2,295	2,354	2,354	2,354	2,354	2,354	2,300	2,247	2,193
e. Acute Psychiatric	1,399	1,359	1,348	1,348	1,348	1,348	1,348	1,357	1,366	1,375
Total Acute	10,400	11,293	11,596	11,703	11,797	11,917	12,081	12,993	13,905	14,818
f. Rehabilitation										
g. Comprehensive Care										
h. Other (Specify/add rows of needed)										
TOTAL DISCHARGES	10,400	11,293	11,596	11,703	11,797	11,917	12,081	12,993	13,905	14,818
2. PATIENT DAYS										
a. General Medical/Surgical*	30,267	32,720	34,069	33,108	32,700	32,613	32,616	35,667	39,143	42,972
b. ICU/CCU	10,820	10,970	11,003	10,423	10,295	10,267	10,268	8,581	9,418	10,339
Total MSGA	41,087	43,690	45,072	43,531	42,995	42,879	42,884	44,248	48,561	53,311
c. Pediatric	107	35	89	88	90	89	88	93	88	84
d. Obstetric	5,885	5,829	5,928	5,825	5,879	5,820	5,762	6,153	5,951	5,809
e. Acute Psychiatric	7,392	8,264	6,541	6,282	6,260	6,197	6,135	7,896	7,870	7,921
Total Acute	54,471	57,818	57,630	55,725	55,223	54,985	54,868	58,391	62,469	67,125
f. Rehabilitation										
g. Comprehensive Care										
h. Other (Specify/add rows of needed)										
TOTAL PATIENT DAYS	54,471	57,818	57,630	55,725	55,223	54,985	54,868	58,391	62,469	67,125
3. AVERAGE LENGTH OF STAY (patient days divided by discharges)										
a. General Medical/Surgical*	6.3	5.4	5.4	5.2	5.1	5.0	4.9	4.8	4.8	4.8
b. ICU/CCU	5.8	7.2	7.0	6.5	6.4	6.3	6.2	4.6	4.6	4.6
Total MSGA	6.2	5.7	5.7	5.5	5.3	5.2	5.1	4.8	4.7	4.8
c. Pediatric	1.8	1.0	2.4	2.4	2.4	2.4	2.4	2.7	2.6	2.6
d. Obstetric	2.6	2.5	2.5	2.5	2.5	2.5	2.4	2.7	2.6	2.6
e. Acute Psychiatric	5.3	6.1	4.9	4.7	4.6	4.6	4.6	5.8	5.8	5.8
Total Acute	5.2	5.1	5.0	4.8	4.7	4.6	4.5	4.5	4.5	4.5
f. Rehabilitation										
g. Comprehensive Care										
h. Other (Specify/add rows of needed)										
TOTAL AVERAGE LENGTH OF STAY	5.2	5.1	5.0	4.8	4.7	4.6	4.5	4.5	4.5	4.5

TABLE F1. STATISTICAL PROJECTIONS - ENTIRE FACILITY - DIMENSIONS

INSTRUCTION: Complete this table for the entire facility, including the proposed project. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). For sections 4 & 5, the number of beds and occupancy percentage should be reported on the basis of licensed beds. In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.						
Indicate CY or FY	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
4. NUMBER OF LICENSED BEDS										
a. General Medical/Surgical*	136	108	107	107	107	107	107	133	133	133
b. ICU/CCU	34	34	34	34	34	34	34	32	32	32
Total MSGA	170	142	141	141	141	141	141	165	165	165
c. Pediatric	8	8	8	8	8	8	8	1	1	1
d. Obstetric	36	36	38	38	38	38	38	22	22	22
e. Acute Psychiatric	28	28	28	28	28	28	28	28	28	28
Total Acute	242	214	215	215	215	215	215	216	216	216
f. Rehabilitation										
g. Comprehensive Care										
h. Other (Specify/add rows of needed)										
TOTAL LICENSED BEDS	242	214	215	215	215	215	215	216	216	216
5. OCCUPANCY PERCENTAGE *IMPORTANT NOTE: Leap year formulas should be changed by applicant to reflect 366 days per year.										
a. General Medical/Surgical*	61.0%	83.0%	87.2%	84.4%	83.5%	83.3%	83.3%	73.3%	80.6%	88.5%
b. ICU/CCU	87.2%	88.4%	88.7%	84.4%	83.5%	83.3%	83.3%	73.3%	80.6%	88.5%
Total MSGA	66.2%	84.3%	87.6%	84.4%	83.5%	83.3%	83.3%	73.3%	80.6%	88.5%
c. Pediatric	3.7%	1.2%	3.0%	3.0%	3.1%	3.0%	3.0%	25.5%	24.2%	23.1%
d. Obstetric	44.8%	44.4%	42.7%	41.9%	42.4%	42.0%	41.5%	76.4%	74.1%	72.3%
e. Acute Psychiatric	72.3%	80.9%	64.0%	61.3%	61.3%	60.6%	60.0%	77.1%	77.0%	77.5%
Total Acute	61.7%	74.0%	73.4%	70.8%	70.4%	70.1%	69.9%	73.9%	79.2%	85.1%
f. Rehabilitation										
g. Comprehensive Care										
h. Other (Specify/add rows of needed)										
TOTAL OCCUPANCY %	61.7%	74.0%	73.4%	70.8%	70.4%	70.1%	69.9%	73.9%	79.2%	85.1%
6. OUTPATIENT VISITS										
a. Emergency Department	43,447	40,380	51,544	51,544	51,544	51,544	51,544	54,430	57,316	60,202
b. Same-day Surgery	1,830	2,215	2,827	2,827	2,827	2,827	2,827	3,042	3,256	3,470
c. Laboratory										
d. Imaging										
e. Other - Psych. Day & Night	3,796	2,303	2,940	2,940	2,940	2,940	2,940	3,163	3,385	3,608
e. Other - Clinic	1,378	697	890	890	890	890	890	957	1,025	1,092
TOTAL OUTPATIENT VISITS	50,451	45,595	58,201	58,201	58,201	58,201	58,201	61,592	64,982	68,373
7. OBSERVATIONS**										
a. Number of Patients	4,056	4,292	4,442	4,479	4,479	4,479	4,479	4,740	5,001	5,262
b. Hours	143,995	130,072	134,618	135,735	135,735	135,735	135,735	143,643	151,550	159,457

* Include beds dedicated to gynecology and addictions, if separate for acute psychiatric unit.

** Services included in the reporting of the "Observation Center", direct expenses incurred in providing bedside care to observation patients; furnished by the hospital on the hospital's premises, including use of a bed and periodic monitoring by the hospital's nursing or other staff, in order to determine the need for a possible admission to the hospitals as an inpatient. Such services must be ordered and documented in writing, given by a medical practitioner; may or may not be provided in a distinct area of the hospital.

TABLE F2. STATISTICAL PROJECTIONS - ENTIRE FACILITY - MWPH

INSTRUCTION: Complete this table for the entire facility, including the proposed project. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). For sections 4 & 5, the number of beds and occupancy percentage should be reported on the basis of licensed beds. In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.								
Indicate CY or FY	FY13	FY14	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
1. DISCHARGES												
a. General Medical/Surgical*												
b. ICU/CCU												
Total MSGA	0	0	0	0	0	0	0	0	0	0	0	0
c. Pediatric	791	797	813	818	822	826	831	835	838	840	843	845
d. Obstetric												
e. Acute Psychiatric												
Total Acute	791	797	813	818	822	826	831	835	838	840	843	845
f. Rehabilitation												
g. Comprehensive Care												
h. Other (Specify/add rows of needed)												
TOTAL DISCHARGES	791	797	813	818	822	826	831	835	838	840	843	845
2. PATIENT DAYS												
a. General Medical/Surgical*												
b. ICU/CCU												
Total MSGA	0	0	0	0	0	0	0	0	0	0	0	0
c. Pediatric	22,056.00	22,230.00	24,245.36	24,597.53	24,921.20	25,251.69	25,610.86	25,940.78	26,245.53	26,519.53	26,822.20	27,098
d. Obstetric												
e. Acute Psychiatric												
Total Acute	22,056	22,230	24,245	24,598	24,921	25,252	25,611	25,941	26,246	26,520	26,822	27,098
f. Rehabilitation												
g. Comprehensive Care												
h. Other (Specify/add rows of needed)												
TOTAL PATIENT DAYS	22,056	22,230	24,245	24,598	24,921	25,252	25,611	25,941	26,246	26,520	26,822	27,098
3. AVERAGE LENGTH OF STAY (patient days divided by discharges)												
a. General Medical/Surgical*	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
b. ICU/CCU	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Total MSGA	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
c. Pediatric	27.88	27.89	29.82	30.07	30.32	30.57	30.82	31.07	31.32	31.57	31.82	32.07
d. Obstetric	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
e. Acute Psychiatric	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Total Acute	27.88	27.89	29.82	30.07	30.32	30.57	30.82	31.07	31.32	31.57	31.82	32.07
f. Rehabilitation	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
g. Comprehensive Care	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
h. Other (Specify/add rows of needed)	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
TOTAL AVERAGE LENGTH OF STAY	27.88	27.89	29.82	30.07	30.32	30.57	30.82	31.07	31.32	31.57	31.82	32.07

TABLE F2. STATISTICAL PROJECTIONS - ENTIRE FACILITY - MWPH

INSTRUCTION: Complete this table for the entire facility, including the proposed project. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). For sections 4 & 5, the number of beds and occupancy percentage should be reported on the basis of licensed beds. In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.									
Indicate CY or FY	FY13	FY14	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24	
4. NUMBER OF LICENSED BEDS													
a. General Medical/Surgical*													
b. ICU/CCU													
Total MSGA	0	0	0	0	0	0	0	0	0	0	0	0	
c. Pediatric	102	102	102	102	102	102	102	102	102	102	102	102	
d. Obstetric													
e. Acute Psychiatric													
Total Acute	102	102	102	102	102	102	102	102	102	102	102	102	
f. Rehabilitation													
g. Comprehensive Care													
h. Other (Specify/add rows of needed)													
TOTAL LICENSED BEDS	102	102	102	102	102	102	102	102	102	102	102	102	
5. OCCUPANCY PERCENTAGE *IMPORTANT NOTE: Leap year formulas should be changed by applicant to reflect 366 days per year.													
a. General Medical/Surgical*													
b. ICU/CCU													
Total MSGA	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	
c. Pediatric	59.2%	59.7%	65.1%	66.1%	66.9%	67.8%	68.8%	69.7%	70.5%	71.2%	72.0%	72.8%	
d. Obstetric													
e. Acute Psychiatric													
Total Acute	59.2%	59.7%	65.1%	65.9%	66.9%	67.8%	68.8%	69.5%	70.5%	71.2%	72.0%	72.8%	
f. Rehabilitation													
g. Comprehensive Care													
h. Other (Specify/add rows of needed)													
TOTAL OCCUPANCY %	59.2%	59.7%	65.1%	65.9%	66.9%	67.8%	68.8%	69.5%	70.5%	71.2%	72.0%	72.6%	
6. OUTPATIENT VISITS													
a. Emergency Department													
b. Same-day Surgery													
c. Laboratory													
d. Imaging													
e. Other:													
Clinic	13,980	12,606	12,984	13,374	13,775	14,188	14,614	15,811	16,366	16,908	16,769	16,617	
Rehabilitation	15,804	15,625	16,094	16,577	17,074	17,586	18,114	18,657	19,217	19,793	20,387	20,999	
Psychology	10,961	12,410	12,782	13,166	13,561	13,968	14,387	14,818	15,263	15,721	16,192	16,678	
TOTAL OUTPATIENT VISITS	40,745	40,641	41,860	43,116	44,410	45,742	47,114	49,287	50,845	52,422	53,349	54,294	
7. OBSERVATIONS**													
a. Number of Patients													
b. Hours													

* Include beds dedicated to gynecology and addictions, if separate for acute psychiatric unit.

** Services included in the reporting of the "Observation Center", direct expenses incurred in providing bedside care to observation patients; furnished by the hospital on the hospital's premises, including use of a bed and periodic monitoring by the hospital's nursing or other staff, in order to determine the need for a possible admission to the hospitals as an inpatient. Such services must be ordered and documented in writing, given by a medical practitioner; may or may not be provided in a distinct area of the hospital.

TABLE G1. REVENUES & EXPENSES, UNINFLATED - ENTIRE FACILITY - DIMENSIONS

INSTRUCTION : Complete this table for the entire facility, including the proposed project. Table G should reflect current dollars (no inflation). Projected revenues and expenses should be consistent with the projections in Table F and with the costs of Manpower listed in Table L. Manpower. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. Specify the sources of non-operating income. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.						
Indicate CY or FY	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
1. REVENUE										
a. Inpatient Services	\$ 173,139									
b. Outpatient Services	\$ 76,775									
Gross Patient Service Revenues (1)	\$ 249,914	\$ 264,820	\$ 268,691	\$ 274,336	\$ 276,983	\$ 279,353	\$ 282,268	\$ 312,879	\$ 322,487	\$ 331,926
c. Allowance For Bad Debt	\$ 16,710	\$ 28,269	\$ 28,134	\$ 28,725	\$ 29,002	\$ 29,250	\$ 29,555	\$ 30,671	\$ 30,618	\$ 30,539
d. Contractual Allowance	\$ 22,759	\$ 30,070	\$ 26,283	\$ 23,835	\$ 24,065	\$ 24,271	\$ 24,524	\$ 25,697	\$ 25,670	\$ 25,621
e. Charity Care	\$ 21,930	\$ 13,185	\$ 13,119	\$ 13,394	\$ 13,524	\$ 13,639	\$ 13,782	\$ 14,302	\$ 14,277	\$ 14,240
e. Uncompensated Care Receipts	\$ (16,487)	\$ (17,044)	\$ (17,303)	\$ (18,529)	\$ (18,797)	\$ (18,908)	\$ (18,968)	\$ (21,025)	\$ (21,671)	\$ (21,777)
Net Patient Services Revenue	\$ 205,003	\$ 210,340	\$ 218,459	\$ 226,910	\$ 229,189	\$ 231,101	\$ 233,375	\$ 263,234	\$ 273,592	\$ 283,303
f. Other Operating Revenues - State Support	\$ 10,650	\$ 10,000	\$ 10,000	\$ 10,000	\$ 10,000	\$ 10,000	\$ 10,000	\$ 3,333	\$ 3,333	\$ -
f. Other Operating Revenues - County Support	\$ 10,650	\$ 12,165	\$ 8,988	\$ 6,516	\$ 6,516	\$ 6,516	\$ 6,516	\$ 3,333	\$ 3,333	\$ -
f. Other Operating Revenues	\$ 5,939	\$ 6,092	\$ 7,134	\$ 7,134	\$ 7,134	\$ 7,134	\$ 7,134	\$ 7,134	\$ 7,134	\$ 7,134
NET OPERATING REVENUE	\$ 232,242	\$ 238,597	\$ 244,581	\$ 250,560	\$ 252,839	\$ 254,751	\$ 257,025	\$ 277,035	\$ 287,393	\$ 290,437
2. EXPENSES										
a. Salaries & Wages (including benefits)	\$ 133,564	\$ 133,828	\$ 127,822	\$ 125,269	\$ 121,438	\$ 117,607	\$ 117,228	\$ 120,053	\$ 123,817	\$ 128,047
b. Contractual Services	\$ 30,498	\$ 35,391	\$ 31,407	\$ 31,651	\$ 32,324	\$ 33,286	\$ 33,215	\$ 36,601	\$ 37,679	\$ 38,728
c. Interest on Current Debt	\$ 1,816	\$ 970	\$ 103	\$ 246	\$ 232	\$ 225	\$ 220			
d. Interest on Project Debt								\$ 13,950	\$ 12,447	\$ 11,385
e. Current Depreciation	\$ 6,567	\$ 7,893	\$ 9,056	\$ 10,511	\$ 11,965	\$ 12,333	\$ 13,762			
f. Project Depreciation								\$ 25,930	\$ 26,430	\$ 27,073
g. Current Amortization	\$ 41	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			
h. Project Amortization								\$ 138	\$ 138	\$ 138
i. Supplies	\$ 33,702	\$ 31,619	\$ 35,988	\$ 36,582	\$ 37,135	\$ 37,865	\$ 38,826	\$ 39,978	\$ 41,238	\$ 42,464
j. Other Expenses - Physician Support	\$ 23,855	\$ 28,326	\$ 32,717	\$ 35,417	\$ 36,980	\$ 37,253	\$ 34,063	\$ 32,467	\$ 32,102	\$ 32,101
j. Other Expenses - Transition Costs	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,000	\$ 700	\$ -	\$ -
j. Other Expenses - UMMS Overhead Allocation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,000	\$ 3,000	\$ 3,000
j. Other Expenses - Utilities	\$ 1,184	\$ 2,932	\$ 2,896	\$ 2,892	\$ 2,891	\$ 2,890	\$ 2,884	\$ 2,969	\$ 3,063	\$ 3,154
TOTAL OPERATING EXPENSES	\$ 231,226	\$ 240,958	\$ 239,990	\$ 242,568	\$ 242,965	\$ 241,460	\$ 242,197	\$ 275,786	\$ 279,916	\$ 286,091
3. INCOME										
a. Income From Operation	\$ 1,016	\$ (2,361)	\$ 4,591	\$ 7,992	\$ 9,874	\$ 13,291	\$ 14,828	\$ 1,249	\$ 7,477	\$ 4,346
b. Non-Operating Income	\$ 12	\$ 24	\$ 24	\$ 24	\$ 24	\$ 24	\$ 24	\$ 36	\$ 24	\$ 24
SUBTOTAL	\$ 1,028	\$ (2,337)	\$ 4,615	\$ 8,016	\$ 9,898	\$ 13,315	\$ 14,852	\$ 1,286	\$ 7,501	\$ 4,370
c. Income Taxes										
NET INCOME (LOSS)	\$ 1,028	\$ (2,337)	\$ 4,615	\$ 8,016	\$ 9,898	\$ 13,315	\$ 14,852	\$ 1,286	\$ 7,501	\$ 4,370
d. Depreciation and Amortization	\$ 6,608	\$ 7,893	\$ 9,056	\$ 10,511	\$ 11,965	\$ 12,333	\$ 13,762	\$ 26,068	\$ 26,568	\$ 27,211
CASH FLOW FROM OPERATIONS	\$ 7,636	\$ 5,555	\$ 13,672	\$ 18,527	\$ 21,863	\$ 25,648	\$ 28,614	\$ 27,354	\$ 34,070	\$ 31,581
Note (1): Since the Hospital signed a Global Budget Revenue Agreement, patient revenues are projected in total for FY2014 - FY2022.										

TABLE G1. REVENUES & EXPENSES, UNINFLATED - ENTIRE FACILITY - DIMENSIONS

INSTRUCTION: Complete this table for the entire facility, including the proposed project. Table G should reflect current dollars (no inflation). Projected revenues and expenses should be consistent with the projections in Table F and with the costs of Manpower listed in Table L. Manpower. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. Specify the sources of non-operating income. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.						
Indicate CY or FY	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
4. PATIENT MIX										
a. Percent of Total Revenue										
1) Medicare	27.2%	25.5%	25.5%	25.5%	25.5%	25.5%	25.5%	27.6%	28.5%	29.5%
2) Medicaid	32.4%	36.5%	36.5%	36.5%	36.5%	36.5%	36.5%	33.4%	32.0%	30.6%
3) Blue Cross	10.6%	9.9%	9.9%	9.9%	9.9%	9.9%	9.9%	9.1%	8.7%	8.3%
4) Commercial Insurance	16.7%	16.0%	16.0%	16.0%	16.0%	16.0%	16.0%	18.9%	20.2%	21.5%
5) Self-pay	11.5%	10.8%	10.8%	10.8%	10.8%	10.8%	10.8%	9.9%	9.5%	9.0%
6) Other	1.6%	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	1.2%	1.1%	1.1%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
b. Percent of Equivalent Inpatient Days										
1) Medicare	27.1%	25.9%	25.9%	25.9%	25.9%	25.9%	25.9%	29.4%	30.9%	32.3%
2) Medicaid	43.2%	41.6%	41.6%	41.6%	41.6%	41.6%	41.6%	35.5%	32.8%	30.6%
3) Blue Cross	9.1%	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%	7.7%	7.1%	6.6%
4) Commercial Insurance	11.4%	10.8%	10.8%	10.8%	10.8%	10.8%	10.8%	16.5%	19.0%	21.2%
5) Self-pay	8.1%	11.8%	11.8%	11.8%	11.8%	11.8%	11.8%	10.0%	9.3%	8.7%
6) Other	1.2%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	0.9%	0.8%	0.8%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Prince George's Hospital Center & Prince George's Regional Medical Center
Key Financial Projection Assumptions

1) Basis of Projection	Based on the FY 2015 budget with adjustments identified below
2) Volumes <ul style="list-style-type: none"> - Inpatient Discharges <ul style="list-style-type: none"> ➢ Interim Period (FY2016-FY2019) ➢ New Hospital (FY2020-FY2022) <ul style="list-style-type: none"> • MSGA • Peds • Psychiatry • Obstetrics - Inpatient Length of Stay <ul style="list-style-type: none"> ➢ MSGA ➢ Peds ➢ Psychiatry ➢ Obstetrics - Outpatient Visits, including Observation 	<p>Average annual increase of 1% per year from 11,596 in FY2015 to 12,081 in FY2019 driven by the execution of Dimension's Cardiovascular Business Plan.</p> <p>49% increase from FY2020 to FY2022 driven by growth in population, relocation, and recapture of market share</p> <p>Immaterial change in projected admissions due to limited population growth and no assumed change in use rates and market share</p> <p>2% increase from FY2020 to FY2022 driven by population growth</p> <p>Decrease by approximately 7% from FY2020 to FY2022 driven by reduction in population and use rate of age cohort</p> <p>To achieve Statewide historical averages, Ages 15-64 will decrease by 15% to 4.47, while Ages 65-74 and Ages 75+ will decrease by 23% to 5.24 and 5.00, respectively, by FY2022</p> <p>Remains constant at 2.63 days from 2015 budget</p> <p>Increases to the Statewide average of 5.8 by FY2018 and then remains constant through FY2022</p> <p>Remains constant at 2.65 days from 2015 budget</p> <p>Remains constant from FY2015 to FY2019 and then increases by the same percentage as the annual increase in total inpatient discharges in FY 2020 - FY 2022</p>
3) Patient Revenue <ul style="list-style-type: none"> - Gross Charges <ul style="list-style-type: none"> ➢ Update Factor <ul style="list-style-type: none"> • Annual Inflation • Capital related rate increase ➢ Population Adjustment ➢ Market Share Adjustment <ul style="list-style-type: none"> • Interim Period (FY2016-FY2019) • New Hospital (FY2020-FY2022) ➢ GBR Adjustment ➢ Case Mix - Revenue Deductions <ul style="list-style-type: none"> ➢ Contractual Allowances <ul style="list-style-type: none"> • Interim Period (FY2016-FY2019) • New Hospital (FY2020-FY2022) ➢ Charity Care Allowance for Bad Debt ➢ UCC Pool Payment <ul style="list-style-type: none"> • Interim Period (FY2016-FY2019) • New Hospital (FY2020-FY2022) 	<p>0.0% annual increase</p> <p>7.6% or \$21.5 increase effective the opening of new hospital in July 2019 (FY2020)</p> <p>0.31% annual increase</p> <p>50% variability with projected growth in volumes related to the Cardiovascular Business Plan. Revenue is recognized in the year after volume growth.</p> <p>50% variability with projected growth in volumes related to recaptured market share. Revenue is recognized immediately in the year of volume growth.</p> <p>\$4.2M is shifted in FY2015 within Dimensions Healthcare System's GBR from LRH to PGHC</p> <p>No governor on changes in case mix</p> <p>Decline by 1.07% of gross revenue in FY2016 due to improved collections as a result of an increase in the EMTALA charge required of Medicaid even on denied claims</p> <p>Declines by 0.9% of gross revenue as the relocation of the hospital and recapture of market share will change the payor mix to reflect more Medicare and Commercial patients</p> <p>Declines by 0.6% of gross revenue as the relocation of the hospital and recapture of market share will change the payor mix to reflect more Medicare and Commercial patients</p> <p>Declines by 1.3% of gross revenue as the relocation of the hospital and recapture of market share will change the payor mix to reflect more Medicare and Commercial patients</p> <p>Increase by 0.28% of gross revenue by FY2017 to reflect increase in three year average of Bad Debts and Charity in FY2012 - FY2014</p> <p>Reduction by 6.7% of gross revenue by FY2020 to reflect reduction in three year average of Bad Debts and Charity in FY2017 - FY2019</p>

TABLE G1. REVENUES EXPENSES, UNINFLATED - ENTIRE FACILITY - DIMENSIONS
ASSUMPTIONS

Prince George's Hospital Center & Prince George's Regional Medical Center
Key Financial Projection Assumptions

4) Other Revenue <ul style="list-style-type: none"> - State Grant - County Grant - McGruder Grant - Physician Billing and Other Revenue 	<p>\$10M per year through 2019 declining to \$3.3M per year in 2020-21 and then \$0 in FY 2022</p> <p>\$9M in 2015 declining to \$6.5M per year in 2016-2019, \$3.3M per year in 2020-2021 and \$0 in 2022</p> <p>Approximately \$1M per year</p> <p>0% increase per year</p>
5) Non-Operating Revenue	<p>0% increase per year</p>
6) Expenses <ul style="list-style-type: none"> - Operating Expense Drivers <ul style="list-style-type: none"> ➢ Salaries ➢ Benefits ➢ Other Operating Expenses - Inflation <ul style="list-style-type: none"> ➢ Operating Exp, excl Phys Support ➢ Physician Support - Expense Variability - Performance Improvements - Physician Recruitment Costs - Transition Costs - UMMS Overhead Allocation - Rental Space - Interest Expense <ul style="list-style-type: none"> ➢ Interim Period (FY2016-FY2019) ➢ New Hospital (FY2020-FY2022) ➢ Line of Credit (FY2020-FY2022) - Depreciation and Amortization <ul style="list-style-type: none"> ➢ Interim Period (FY2016-FY2019) ➢ New Hospital (FY2020-FY2022) 	<p>Based on FTEs per Average Occupied Bed which is expected to decrease from 6.5 in FY 2015 to Statewide historical average of 5.8 in FY 2022</p> <p>Reflects 27% of salaries as included in 2015 budget</p> <p>Reflects changes in adjusted admissions</p> <p>0.0% increase per year</p> <p>0.0% increase per year</p> <p>50% throughout projection period</p> <p>Reduction of \$8M in 2016-2018 based on change in workforce rules in Service Employees International Union (SEIU) agreement</p> <p>\$17.2M of physician compensation guarantees between 2016 and 2020 to recruit additional primary care physicians and specialists in obstetrics, neurology, gastro, pain, orthopaedics, and urology. This recruitment cost is in addition to other annual physician support which totals \$32M by 2022</p> <p>\$2.7M of costs spread between 2019 and 2020 associated with the transition of campuses from Cheverly to Largo. Based on 2.35% of Salaries and Benefits as calculated from detailed studies included in other similar Maryland hospital replacement projects.</p> <p>\$3M annual overhead allocated to PGRMC upon opening of new facility in FY2020</p> <p>60,000 sq. ft. of space is expected to be leased for administration at \$40 per sq.ft. effective the opening of the new building</p> <p>Series 1994 Bonds paid off by County in 2014</p> <p>\$206.5M bond issuance at 5.5% over 30 years</p> <p>\$68.4M loan required at opening of new hospital to fund 100 days of cash on hand at 5.0% interest. Will be paid off over first four years of operations.</p> <p>Reflects FY2015 budget plus depreciation on annual routine capital expenditures with average lives of 7 years</p> <p>Reflects depreciation on new hospital facility with average useful life of 23 years plus depreciation on annual routine capital expenditures with average lives of 7 years</p>
7) Routine Capital Expenditures <ul style="list-style-type: none"> - Interim Period (FY2016-FY2019) - New Hospital (FY2020-FY2022) 	<p>\$10M per year</p> <p>\$5M in 2020, \$8.5M in 2021, and \$13M in 2022</p>
8) Debt <ul style="list-style-type: none"> - New Hospital Construction - Line of Credit 	<p>\$206.5M bond issuance in December 2015 at 5.5% over 30 years. Interest expense during construction will be capitalized. Principal payments will begin upon the new hospital's commencement of operations in July 2019</p> <p>\$68.4M loan required at opening of new hospital to fund 100 days of cash on hand at 5.0% interest. Will be paid off over first four years of operations as cash exceeds 100 days of cash on hand</p>

TABLE G1. REVENUES EXPENSES, UNINFLATED - ENTIRE FACILITY - DIMENSIONS
ASSUMPTIONS

**DIMENSIONS HEALTHCARE SYSTEM
PLANNED GBR OUTCOME FOR FY 2014**

	FY14 Plan	GBR Rev	GBR + 0.5%	Over (Under) GBR + 0.5%
PGHC	\$266,427,661	\$261,425,365	\$262,732,492	\$3,695,169
LRH	\$119,029,497	\$122,799,111	\$123,413,107	-\$4,383,610
BEC	\$16,383,745	\$15,617,219	\$15,695,305	\$688,440
	<u>\$401,840,903</u>	<u>\$399,841,695</u>	<u>\$401,840,903</u>	<u>\$0</u>
	\$1,999,208 Planned overcharge @0.5%			

ACTUAL GBR OUTCOME FOR FY 2014

	FY14 Actual	GBR Rev	GBR + 0.5%	Over (Under) GBR + 0.5%	Over (Under) Plan
PGHC	\$267,282,410	\$261,425,365	\$262,732,492	\$4,549,918	\$854,749
LRH	\$118,865,017	\$122,799,111	\$123,413,107	-\$4,548,090	-\$164,480
BEC	\$16,513,441	\$15,617,219	\$15,695,305	\$818,136	\$129,696
	<u>\$402,660,868</u>	<u>\$399,841,695</u>	<u>\$401,840,903</u>	<u>\$819,965</u>	<u>\$819,965</u>
	0.71% Actual % in excess of GBR			0.20%	

<<<----- \$2,819,173 Actual \$ in excess of GBR Actual rev in excess of plan

This is a system wide overcharge and will be set against revenue caps in FY15.
It will be pro rated to hospitals based on their GBR revenues.

		GBR Rev	Spread
Total	PGHC	\$261,425,365	1,843,238
Overcharge	LRH	\$122,799,111	865,823
	BEC	\$15,617,219	110,113
		<u>\$399,841,695</u>	<u>2,819,173</u>

----->>>>>

TABLE G2. REVENUES & EXPENSES, UNINFLATED - ENTIRE FACILITY - MWPH

INSTRUCTION: Complete this table for the entire facility, including the proposed project. Table G should reflect current dollars (no inflation). Projected revenues and expenses should be consistent with the projections in Table F and with the costs of Manpower listed in Table L. Manpower. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. Specify the sources of non-operating income. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.								
Indicate CY or FY	FY13	FY14	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
1. REVENUE												
a. Inpatient Services	\$ 42,757	\$ 44,150	\$ 45,964	\$ 45,943	\$ 45,859	\$ 46,467	\$ 47,128	\$ 47,735	\$ 48,296	\$ 48,800	\$ 49,357	\$ 49,866
b. Outpatient Services	\$ 12,723	\$ 13,713	\$ 14,275	\$ 14,269	\$ 14,243	\$ 14,432	\$ 14,865	\$ 15,311	\$ 15,770	\$ 16,243	\$ 16,730	\$ 17,232
Gross Patient Service Revenues	\$ 55,479	\$ 57,863	\$ 60,239	\$ 60,211	\$ 60,102	\$ 60,899	\$ 61,993	\$ 63,046	\$ 64,066	\$ 65,043	\$ 66,088	\$ 67,098
c. Allowance For Bad Debt	\$ 533	\$ 657	\$ 602	\$ 602	\$ 601	\$ 609	\$ 620	\$ 630	\$ 641	\$ 650	\$ 661	\$ 671
d. Contractual Allowance	\$ 3,360	\$ 4,165	\$ 4,336	\$ 4,334	\$ 4,326	\$ 4,384	\$ 4,462	\$ 4,538	\$ 4,611	\$ 4,682	\$ 4,757	\$ 4,830
e. Charity Care	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Net Patient Services Revenue	\$ 51,586	\$ 53,041	\$ 55,301	\$ 55,275	\$ 55,175	\$ 55,907	\$ 56,911	\$ 57,877	\$ 58,814	\$ 59,711	\$ 60,670	#REF!
f. Other Operating Revenues (Specify/add rows if needed) [specify]	\$ 2,912	\$ 1,723	\$ 758	\$ 765	\$ 773	\$ 780	\$ 788	\$ 796	\$ 804	\$ 812	\$ 820	\$ 828
NET OPERATING REVENUE	\$ 54,498	\$ 54,764	\$ 56,059	\$ 56,040	\$ 55,948	\$ 56,687	\$ 57,699	\$ 58,673	\$ 59,618	\$ 60,523	\$ 61,490	#REF!
2. EXPENSES												
a. Salaries & Wages (including benefits)	\$ 34,069	\$ 34,837	\$ 37,237	\$ 36,857	\$ 36,431	\$ 36,014	\$ 36,660	\$ 37,283	\$ 37,886	\$ 38,464	\$ 39,082	\$ 39,679
b. Contractual Services	\$ 5,417	\$ 4,937	\$ 5,915	\$ 5,855	\$ 5,787	\$ 5,721	\$ 5,824	\$ 5,922	\$ 6,018	\$ 6,110	\$ 6,208	\$ 6,303
c. Interest on Current Debt	\$ 83	\$ 87	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d. Interest on Project Debt	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
e. Current Depreciation	\$ 2,025	\$ 2,469	\$ 2,390	\$ 2,366	\$ 2,338	\$ 2,312	\$ 2,353	\$ 2,393	\$ 2,432	\$ 2,469	\$ 2,509	\$ 2,547
f. Project Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
g. Current Amortization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
h. Project Amortization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
i. Supplies	\$ 5,136	\$ 5,777	\$ 5,852	\$ 5,792	\$ 5,725	\$ 5,659	\$ 5,761	\$ 5,859	\$ 5,954	\$ 6,045	\$ 6,142	\$ 6,235
j. Other Expenses (Specify/add rows if needed)	\$ 1,896	\$ 2,114	\$ 2,466	\$ 2,441	\$ 2,413	\$ 2,385	\$ 2,428	\$ 2,469	\$ 2,509	\$ 2,548	\$ 2,589	\$ 2,628
TOTAL OPERATING EXPENSES	\$ 48,626	\$ 50,221	\$ 53,860	\$ 53,310	\$ 52,694	\$ 52,091	\$ 53,026	\$ 53,927	\$ 54,800	\$ 55,636	\$ 56,529	\$ 57,393
3. INCOME												
a. Income From Operation	\$ 5,872	\$ 4,543	\$ 2,199	\$ 2,730	\$ 3,254	\$ 4,596	\$ 4,672	\$ 4,746	\$ 4,818	\$ 4,887	\$ 4,961	#REF!
b. Non-Operating Income	\$ 1,813	\$ 3,254	\$ 1,187	\$ 1,164	\$ 1,160	\$ 1,203	\$ 1,230	\$ 1,267	\$ 1,305	\$ 1,344	\$ 1,384	\$ 1,426
SUBTOTAL	\$ 7,685	\$ 7,797	\$ 3,386	\$ 3,894	\$ 4,414	\$ 5,799	\$ 5,902	\$ 6,013	\$ 6,123	\$ 6,231	\$ 6,345	#REF!
c. Income Taxes												
NET INCOME (LOSS)	\$ 7,685	\$ 7,797	\$ 3,386	\$ 3,894	\$ 4,414	\$ 5,799	\$ 5,902	\$ 6,013	\$ 6,123	\$ 6,231	\$ 6,345	#REF!

TABLE G2. REVENUES & EXPENSES, UNINFLATED - ENTIRE FACILITY - MWPH

***INSTRUCTION :** Complete this table for the entire facility, including the proposed project. Table G should reflect current dollars (no inflation). Projected revenues and expenses should be consistent with the projections in Table F and with the costs of Manpower listed in Table L. Manpower. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. Specify the sources of non-operating income. See additional instruction in the column to the right of the table.*

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.								
Indicate CY or FY	FY13	FY14	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
4. PATIENT MIX												
a. Percent of Total Revenue												
1) Medicare	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%
2) Medicaid	71.3%	70.8%	70.8%	70.8%	70.8%	70.8%	70.8%	70.8%	70.8%	70.8%	70.8%	70.8%
3) Blue Cross	12.7%	14.8%	14.8%	14.8%	14.8%	14.8%	14.8%	14.8%	14.8%	14.8%	14.8%	14.8%
4) Commercial Insurance	7.3%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%
5) Self-pay	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
6) Other	8.2%	7.4%	7.4%	7.4%	7.4%	7.4%	7.4%	7.4%	7.4%	7.4%	7.4%	7.4%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
b. Percent of Equivalent Inpatient Days												
1) Medicare	0.2%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%
2) Medicaid	79.6%	78.3%	79.0%	78.7%	78.8%	78.7%	78.8%	78.8%	78.8%	78.8%	78.8%	78.8%
3) Blue Cross	9.0%	10.7%	9.9%	10.3%	10.1%	10.2%	10.1%	10.2%	10.1%	10.2%	10.2%	10.2%
4) Commercial Insurance	4.6%	4.8%	4.7%	4.7%	4.7%	4.7%	4.7%	4.7%	4.7%	4.7%	4.7%	4.7%
5) Self-pay	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
6) Other	6.6%	6.0%	6.3%	6.2%	6.2%	6.2%	6.2%	6.2%	6.2%	6.2%	6.2%	6.2%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Assumptions For CON Model - MWPH

PG Volume Assumptions

1. Inpatient volume assumptions are based on use rate: the number of admissions per projected Maryland population aged 0-4.
2. Use rate for FY 2014 is average of rate for FY 2013 and FY 2014.
Use rate for FY 2015 - FY 2023 is average of FY 2013 and FY 2014. Growth from FY 2014 is expected due to new waiver with population health model, encouraging hospitals to move patients to lower-cost settings. Increased admissions also
3. seen resulting from closer relationship between PG hospital and UMMS, of which MWPH is a part.
4. Average length of stay for FY 2015 is average of past five years.
Average length of stay for FY 2016 - FY 2023 grows at .25 days per year. Increase is expected due to new waiver with
5. population health model, encouraging hospitals to move patients more quickly to lower-cost settings.
Outpatient volumes assumptions are based on current demand. Rehabilitation and psychology are projected to double with
6. the availability of new space; clinic volumes are projected to remain stable.

Rogers Volume Assumptions

1. Inpatient volume assumptions are based on use rate: the number of admissions per projected Maryland population aged 0-4.
Use rate for FY 2015 is based on actual for FY 2014. Use rate was lower in FY 2012 and FY 2013 due to renovations to
2. largest patient unit. FY 2014 is first year with completed unit with greater capacity.
3. Use rate for FY 2015 - FY 2021 reflects this same higher use rate as in FY 2014, due to capacity and waiver model
4. Average length of stay for FY 2015 is average of past five years.
Average length of stay for FY 2016 - FY 2023 grows at .25 days per year. Increase is expected due to new waiver with
5. population health model, encouraging hospitals to move patients more quickly to lower-cost settings.
6. Outpatient volumes are projected to grow by 3% per year, consistent with current trends.

TABLE H1. REVENUES & EXPENSES, INFLATED - ENTIRE FACILITY - DIMENSIONS

INSTRUCTION: Complete this table for the entire facility, including the proposed project. Table H should reflect inflation. Projected revenues and expenses should be consistent with the projections in Table F. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.						
Indicate CY or FY	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
1. REVENUE										
a. Inpatient Services	\$ 173,139									
b. Outpatient Services	\$ 76,775									
Gross Patient Service Revenues (1)	\$ 249,914	\$ 264,820	\$ 268,691	\$ 280,515	\$ 289,675	\$ 298,817	\$ 308,810	\$ 347,587	\$ 366,476	\$ 385,852
c. Allowance For Bad Debt	\$ 16,710	\$ 28,269	\$ 28,134	\$ 29,372	\$ 30,331	\$ 31,288	\$ 32,335	\$ 34,056	\$ 34,769	\$ 35,466
d. Contractual Allowance	\$ 22,759	\$ 30,070	\$ 26,283	\$ 24,440	\$ 25,238	\$ 26,034	\$ 26,905	\$ 28,886	\$ 29,510	\$ 30,122
e. Charity Care	\$ 21,930	\$ 13,185	\$ 13,119	\$ 13,696	\$ 14,143	\$ 14,590	\$ 15,077	\$ 15,880	\$ 16,213	\$ 16,537
e. Uncompensated Care Receipts	\$ (16,487)	\$ (17,044)	\$ (17,303)	\$ (18,946)	\$ (19,658)	\$ (20,226)	\$ (20,751)	\$ (23,357)	\$ (24,627)	\$ (25,310)
Net Patient Services Revenue	\$ 205,003	\$ 210,340	\$ 218,459	\$ 231,954	\$ 239,621	\$ 247,131	\$ 255,244	\$ 292,123	\$ 310,611	\$ 329,036
f. Other Operating Revenues - State Support	\$ 10,650	\$ 10,000	\$ 10,000	\$ 10,000	\$ 10,000	\$ 10,000	\$ 10,000	\$ 3,333	\$ 3,333	\$ -
f. Other Operating Revenues - County Support	\$ 10,650	\$ 12,165	\$ 8,988	\$ 6,516	\$ 6,516	\$ 6,516	\$ 6,516	\$ 3,333	\$ 3,333	\$ -
f. Other Operating Revenues	\$ 5,939	\$ 6,092	\$ 7,134	\$ 7,195	\$ 7,257	\$ 7,319	\$ 7,257	\$ 7,319	\$ 7,382	\$ 7,445
NET OPERATING REVENUE	\$ 232,242	\$ 238,597	\$ 244,581	\$ 255,665	\$ 263,394	\$ 270,965	\$ 279,017	\$ 306,108	\$ 324,659	\$ 336,481
2. EXPENSES										
a. Salaries & Wages (including benefits)	\$ 133,564	\$ 133,828	\$ 127,822	\$ 128,335	\$ 127,418	\$ 126,375	\$ 129,100	\$ 135,559	\$ 143,285	\$ 151,867
b. Contractual Services	\$ 30,498	\$ 35,391	\$ 31,407	\$ 32,421	\$ 33,306	\$ 34,482	\$ 35,270	\$ 39,636	\$ 41,825	\$ 44,065
c. Interest on Current Debt	\$ 1,816	\$ 970	\$ 103	\$ 246	\$ 232	\$ 225	\$ 220			
d. Interest on Project Debt								\$ 14,440	\$ 13,115	\$ 12,319
e. Current Depreciation	\$ 6,567	\$ 7,893	\$ 9,056	\$ 10,511	\$ 11,965	\$ 12,333	\$ 13,762			
f. Project Depreciation								\$ 25,930	\$ 26,430	\$ 27,073
g. Current Amortization	\$ 41	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -			
h. Project Amortization								\$ 138	\$ 138	\$ 138
i. Supplies	\$ 33,702	\$ 31,619	\$ 35,988	\$ 37,586	\$ 38,545	\$ 39,726	\$ 41,861	\$ 44,195	\$ 46,722	\$ 49,307
j. Other Expenses - Physician Support	\$ 23,855	\$ 28,326	\$ 32,717	\$ 37,155	\$ 40,039	\$ 41,475	\$ 40,106	\$ 40,408	\$ 42,074	\$ 44,215
j. Other Expenses - Transition Costs	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 2,200	\$ 800	\$ -	\$ -
j. Other Expenses - UMMS Overhead Allocation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ 3,000	\$ 3,075	\$ 3,152
j. Other Expenses - Utilities	\$ 1,184	\$ 2,932	\$ 2,896	\$ 2,964	\$ 2,981	\$ 2,999	\$ 3,067	\$ 3,238	\$ 3,423	\$ 3,612
TOTAL OPERATING EXPENSES	\$ 231,226	\$ 240,958	\$ 239,990	\$ 249,217	\$ 254,486	\$ 257,615	\$ 265,584	\$ 307,342	\$ 320,086	\$ 335,747
3. INCOME										
a. Income From Operation	\$ 1,016	\$ (2,361)	\$ 4,591	\$ 6,448	\$ 8,907	\$ 13,351	\$ 13,433	\$ (1,234)	\$ 4,573	\$ 734
b. Non-Operating Income	\$ 12	\$ 24	\$ 24	\$ 25	\$ 25	\$ 25	\$ 25	\$ 38	\$ 26	\$ 26
SUBTOTAL	\$ 1,028	\$ (2,337)	\$ 4,616	\$ 6,473	\$ 8,932	\$ 13,376	\$ 13,458	\$ (1,196)	\$ 4,599	\$ 760
c. Income Taxes										
NET INCOME (LOSS)	\$ 1,028	\$ (2,337)	\$ 4,616	\$ 6,473	\$ 8,932	\$ 13,376	\$ 13,458	\$ (1,196)	\$ 4,599	\$ 760
d. Depreciation and Amortization	\$ 6,608	\$ 7,893	\$ 9,056	\$ 10,511	\$ 11,965	\$ 12,333	\$ 13,762	\$ 26,068	\$ 26,568	\$ 27,211
CASH FLOW FROM OPERATIONS	\$ 7,636	\$ 5,555	\$ 13,672	\$ 16,983	\$ 20,897	\$ 25,709	\$ 27,220	\$ 24,873	\$ 31,167	\$ 27,971
Note (1): Since the Hospital signed a Global Budget Revenue Agreement, patient revenues are projected in total for FY2014 - FY2022.										

TABLE H1. REVENUES & EXPENSES, INFLATED - ENTIRE FACILITY - DIMENSIONS

INSTRUCTION: Complete this table for the entire facility, including the proposed project. Table H should reflect inflation. Projected revenues and expenses should be consistent with the projections in Table F. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.						
Indicate CY or FY	FY 2013	FY 2014	FY 2015	FY 2016	FY 2017	FY 2018	FY 2019	FY 2020	FY 2021	FY 2022
4. PATIENT MIX										
a. Percent of Total Revenue										
1) Medicare	27.2%	25.5%	25.5%	25.5%	25.5%	25.5%	25.5%	27.6%	28.6%	29.5%
2) Medicaid	32.4%	36.5%	36.5%	36.5%	36.5%	36.5%	36.5%	33.4%	32.0%	30.6%
3) Blue Cross	10.6%	9.9%	9.9%	9.9%	9.9%	9.9%	9.9%	9.0%	8.7%	8.3%
4) Commercial Insurance	16.7%	16.0%	16.0%	16.0%	16.0%	16.0%	16.0%	18.9%	20.2%	21.5%
5) Self-pay	11.5%	10.8%	10.8%	10.8%	10.8%	10.8%	10.8%	9.9%	9.4%	9.0%
6) Other	1.6%	1.3%	1.3%	1.3%	1.3%	1.3%	1.3%	1.2%	1.1%	1.1%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
b. Percent of Equivalent Inpatient Days										
1) Medicare	27.1%	25.9%	25.9%	25.9%	25.9%	25.9%	25.9%	29.4%	30.9%	32.3%
2) Medicaid	43.2%	41.6%	41.6%	41.6%	41.6%	41.6%	41.6%	35.5%	32.8%	30.6%
3) Blue Cross	9.1%	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%	7.7%	7.1%	6.6%
4) Commercial Insurance	11.4%	10.8%	10.8%	10.8%	10.8%	10.8%	10.8%	16.5%	19.0%	21.2%
5) Self-pay	8.1%	11.8%	11.8%	11.8%	11.8%	11.8%	11.8%	10.0%	9.3%	8.7%
6) Other	1.2%	1.0%	1.0%	1.0%	1.0%	1.0%	1.0%	0.9%	0.8%	0.8%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Prince George's Hospital Center & Prince George's Regional Medical Center
Key Financial Projection Assumptions

1) Basis of Projection	Based on the FY 2015 budget with adjustments identified below
2) Volumes <ul style="list-style-type: none"> - Inpatient Discharges <ul style="list-style-type: none"> ➢ Interim Period (FY2016-FY2019) ➢ New Hospital (FY2020-FY2022) <ul style="list-style-type: none"> • MSGA • Peds • Psychiatry • Obstetrics - Inpatient Length of Stay <ul style="list-style-type: none"> ➢ MSGA ➢ Peds ➢ Psychiatry ➢ Obstetrics - Outpatient Visits, including Observation 	<p>Average annual increase of 1% per year from 11,596 in FY2015 to 12,081 in FY2019 driven by the execution of Dimension's Cardiovascular Business Plan.</p> <p>49% increase from FY2020 to FY2022 driven by growth in population, relocation, and recapture of market share</p> <p>Immaterial change in projected admissions due to limited population growth and no assumed change in use rates and market share</p> <p>2% increase from FY2020 to FY2022 driven by population growth</p> <p>Decrease by approximately 7% from FY2020 to FY2022 driven by reduction in population and use rate of age cohort</p> <p>To achieve Statewide historical averages, Ages 15-64 will decrease by 15% to 4.47, while Ages 65-74 and Ages 75+ will decrease by 23% to 5.24 and 5.00, respectively, by FY2022</p> <p>Remains constant at 2.63 days from 2015 budget</p> <p>Increases to the Statewide average of 5.8 by FY2018 and then remains constant through FY2022</p> <p>Remains constant at 2.65 days from 2015 budget</p> <p>Remains constant from FY2015 to FY2019 and then increases by the same percentage as the annual increase in total inpatient discharges in FY 2020 - FY 2022</p>
3) Patient Revenue <ul style="list-style-type: none"> - Gross Charges <ul style="list-style-type: none"> ➢ Update Factor <ul style="list-style-type: none"> • Annual Inflation • Capital related rate increase ➢ Population Adjustment ➢ Market Share Adjustment <ul style="list-style-type: none"> • Interim Period (FY2016-FY2019) • New Hospital (FY2020-FY2022) ➢ GBR Adjustment ➢ Case Mix - Revenue Deductions <ul style="list-style-type: none"> ➢ Contractual Allowances <ul style="list-style-type: none"> • Interim Period (FY2016-FY2019) • New Hospital (FY2020-FY2022) ➢ Charity Care ➢ Allowance for Bad Debt ➢ UCC Pool Payment <ul style="list-style-type: none"> • Interim Period (FY2016-FY2019) • New Hospital (FY2020-FY2022) 	<p>2.30% annual increase</p> <p>7.0% or \$21.5 increase effective the opening of new hospital in July 2019 (FY2020)</p> <p>0.31% annual increase</p> <p>50% variability with projected growth in volumes related to the Cardiovascular Business Plan. Revenue is recognized in the year after volume growth.</p> <p>50% variability with projected growth in volumes related to recaptured market share. Revenue is recognized immediately in the year of volume growth.</p> <p>\$4.2M is shifted in FY2015 within Dimensions Healthcare System's GBR from LRH to PGHC</p> <p>No governor on changes in case mix</p> <p>Decline by 1.07% of gross revenue in FY2016 due to improved collections as a result of an increase in the EMTALA charge required of Medicaid even on denied claims</p> <p>Declines by 0.9% of gross revenue as the relocation of the hospital and recapture of market share will change the payor mix to reflect more Medicare and Commercial patients</p> <p>Declines by 0.6% of gross revenue as the relocation of the hospital and recapture of market share will change the payor mix to reflect more Medicare and Commercial patients</p> <p>Declines by 1.3% of gross revenue as the relocation of the hospital and recapture of market share will change the payor mix to reflect more Medicare and Commercial patients</p> <p>Increase by 0.28% of gross revenue by FY2017 to reflect increase in three year average of Bad Debts and Charity in FY2012 - FY2014</p> <p>Reduction by 6.7% of gross revenue by FY2020 to reflect reduction in three year average of Bad Debts and Charity in FY2017 - FY2019</p>

TABLE H1. REVENUES EXPENSES, INFLATED - ENTIRE FACILITY - DIMENSIONS
ASSUMPTIONS

Prince George's Hospital Center & Prince George's Regional Medical Center
Key Financial Projection Assumptions

4) Other Revenue <ul style="list-style-type: none"> - State Grant - County Grant - McGruder Grant - Physician Billing and Other Revenue 	<p>\$10M per year through 2019 declining to \$3.3M per year in 2020-21 and then \$0 in FY 2022</p> <p>\$9M in 2015 declining to \$6.5M per year in 2016-2019, \$3.3M per year in 2020-2021 and \$0 in 2022</p> <p>Approximately \$1M per year</p> <p>1% increase per year</p>
5) Non-Operating Revenue	<p>1% increase per year</p>
6) Expenses <ul style="list-style-type: none"> - Operating Expense Drivers <ul style="list-style-type: none"> ➢ Salaries ➢ Benefits ➢ Other Operating Expenses - Inflation <ul style="list-style-type: none"> ➢ Operating Exp, excl Phys Support ➢ Physician Support - Expense Variability - Performance Improvements - Physician Recruitment Costs - Transition Costs - UMMS Overhead Allocation - Rental Space - Interest Expense <ul style="list-style-type: none"> ➢ Interim Period (FY2016-FY2019) ➢ New Hospital (FY2020-FY2022) ➢ Line of Credit (FY2020-FY2022) - Depreciation and Amortization <ul style="list-style-type: none"> ➢ Interim Period (FY2016-FY2019) ➢ New Hospital (FY2020-FY2022) 	<p>Based on FTEs per Average Occupied Bed which is expected to decrease from 6.5 in FY 2015 to Statewide historical average of 5.8 in FY 2022</p> <p>Reflects 27% of salaries as included in 2015 budget</p> <p>Reflects changes in adjusted admissions</p> <p>2.5% increase per year</p> <p>5.0% increase per year</p> <p>50% throughout projection period</p> <p>Reduction of \$8M in 2016-2018 based on change in workforce rules in Service Employees International Union (SEIU) agreement</p> <p>\$17.2M of physician compensation guarantees between 2016 and 2020 to recruit additional primary care physicians and specialists in obstetrics, neurology, gastro, pain, orthopaedics, and urology. This recruitment cost is in addition to other annual physician support which totals \$44M by 2022</p> <p>\$3.0M of costs spread between 2019 and 2020 associated with the transition of campuses from Cheverly to Largo. Based on 2.35% of Salaries and Benefits as calculated from detailed studies included in other similar Maryland hospital replacement projects.</p> <p>\$3M overhead allocated to PGRMC upon opening of new facility in FY2020 expected to grow with inflation</p> <p>60,000 sq. ft. of space is expected to be leased for administration at \$40 per sq.ft. effective the opening of the new building</p> <p>Series 1994 Bonds paid off by County in 2014</p> <p>\$206.5M bond issuance at 5.5% over 30 years</p> <p>\$77.1M loan required at opening of new hospital to fund 100 days of cash on hand at 5.0% interest. Will be paid off over first six years of operations.</p> <p>Reflects FY2015 budget plus depreciation on annual routine capital expenditures with average lives of 7 years</p> <p>Reflects depreciation on new hospital facility with average useful life of 23 years plus depreciation on annual routine capital expenditures with average lives of 7 years</p>
7) Routine Capital Expenditures <ul style="list-style-type: none"> - Interim Period (FY2016-FY2019) - New Hospital (FY2020-FY2022) 	<p>\$10M per year</p> <p>\$5M in 2020, \$8.5M in 2021, and \$13M in 2022</p>
8) Debt <ul style="list-style-type: none"> - New Hospital Construction - Line of Credit 	<p>\$206.5M bond issuance in December 2015 at 5.5% over 30 years. Interest expense during construction will be capitalized. Principal payments will begin upon the new hospital's commencement of operations in July 2019</p> <p>\$77.1M loan required at opening of new hospital to fund 100 days of cash on hand at 5.0% interest. Will be paid off over first six years of operations as cash exceeds 100 days of cash on hand</p>

TABLE H1. REVENUES EXPENSES, INFLATED - ENTIRE FACILITY - DIMENSIONS
ASSUMPTIONS

**DIMENSIONS HEALTHCARE SYSTEM
PLANNED GBR OUTCOME FOR FY 2014**

	FY14 Plan	GBR Rev	GBR + 0.5%	Over (Under) GBR + 0.5%
PGHC	\$266,427,661	\$261,425,365	\$262,732,492	\$3,695,169
LRH	\$119,029,497	\$122,799,111	\$123,413,107	-\$4,383,610
BEC	\$16,383,745	\$15,617,219	\$15,695,305	\$688,440
	<u>\$401,840,903</u>	<u>\$399,841,695</u>	<u>\$401,840,903</u>	<u>\$0</u>
	\$1,999,208 Planned overcharge @0.5%			

ACTUAL GBR OUTCOME FOR FY 2014

	FY14 Actual	GBR Rev	GBR + 0.5%	Over (Under) GBR + 0.5%	Over (Under) Plan
PGHC	\$267,282,410	\$261,425,365	\$262,732,492	\$4,549,918	\$854,749
LRH	\$118,865,017	\$122,799,111	\$123,413,107	-\$4,548,090	-\$164,480
BEC	\$16,513,441	\$15,617,219	\$15,695,305	\$818,136	\$129,696
	<u>\$402,660,868</u>	<u>\$399,841,695</u>	<u>\$401,840,903</u>	<u>\$819,965</u>	<u>\$819,965</u>
	0.71% Actual % in excess of GBR			0.20%	

<<<----- \$2,819,173 Actual \$ in excess of GBR Actual rev in excess of plan

This is a system wide overcharge and will be set against revenue caps in FY15.
It will be pro rated to hospitals based on their GBR revenues.

		GBR Rev	Spread
Total	PGHC	\$261,425,365	1,843,238
Overcharge	LRH	\$122,799,111	865,823
	BEC	\$15,617,219	110,113
		<u>\$399,841,695</u>	<u>2,819,173</u>

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TABLE H2. REVENUES & EXPENSES, INFLATED - ENTIRE FACILITY - MWPH

INSTRUCTION: Complete this table for the entire facility, including the proposed project. Table H should reflect inflation. Projected revenues and expenses should be consistent with the projections in Table F. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.									
Indicate CY or FY	FY13	FY14	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24	
1. REVENUE													
a. Inpatient Services	\$ 42,757	\$ 47,087	\$ 45,964	\$ 46,632	\$ 46,547	\$ 47,164	\$ 47,835	\$ 48,451	\$ 49,021	\$ 49,532	\$ 50,098	\$ 50,614	
b. Outpatient Services	\$ 12,723	\$ 13,822	\$ 14,275	\$ 14,483	\$ 14,456	\$ 14,648	\$ 15,088	\$ 15,540	\$ 16,006	\$ 16,487	\$ 16,981	\$ 17,491	
Gross Patient Service Revenues	\$ 55,479	\$ 60,909	\$ 60,239	\$ 61,114	\$ 61,004	\$ 61,813	\$ 62,923	\$ 63,992	\$ 65,027	\$ 66,019	\$ 67,079	\$ 68,104	
c. Allowance For Bad Debt	\$ 533	\$ 589	\$ 602	\$ 611	\$ 610	\$ 618	\$ 629	\$ 640	\$ 650	\$ 660	\$ 671	\$ 681	
d. Contractual Allowance	\$ 3,360	\$ 4,002	\$ 4,336	\$ 4,399	\$ 4,391	\$ 4,449	\$ 4,529	\$ 4,606	\$ 4,681	\$ 4,752	\$ 4,828	\$ 4,902	
e. Charity Care	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
Net Patient Services Revenue	\$ 51,586	\$ 56,318	\$ 55,301	\$ 56,104	\$ 56,002	\$ 56,745	\$ 57,764	\$ 58,746	\$ 59,696	\$ 60,607	\$ 61,580	\$ 62,521	
f. Other Operating Revenues (Specify/add rows if needed)	\$ 2,912	\$ 750	\$ 758	\$ 765	\$ 773	\$ 780	\$ 788	\$ 796	\$ 804	\$ 812	\$ 820	\$ 828	
NET OPERATING REVENUE	\$ 54,498	\$ 57,068	\$ 56,059	\$ 56,869	\$ 56,775	\$ 57,525	\$ 58,552	\$ 59,541	\$ 60,500	\$ 61,418	\$ 62,400	\$ 63,349	
2. EXPENSES													
a. Salaries & Wages (including benefits)	\$ 34,069	\$ 39,117	\$ 37,237	\$ 37,778	\$ 37,342	\$ 36,914	\$ 37,577	\$ 38,215	\$ 38,834	\$ 39,426	\$ 40,059	\$ 40,671	
b. Contractual Services	\$ 5,417	\$ 5,596	\$ 5,915	\$ 6,001	\$ 5,932	\$ 5,864	\$ 5,969	\$ 6,071	\$ 6,169	\$ 6,263	\$ 6,363	\$ 6,461	
c. Interest on Current Debt	\$ 83	\$ 151	\$ -	\$ -	\$ -								
d. Interest on Project Debt	\$ -	\$ -	\$ -	\$ -	\$ -								
e. Current Depreciation	\$ 2,025	\$ 2,381	\$ 2,390	\$ 2,425	\$ 2,397	\$ 2,369	\$ 2,412	\$ 2,453	\$ 2,493	\$ 2,531	\$ 2,571	\$ 2,611	
f. Project Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -								
g. Current Amortization	\$ -	\$ -	\$ -	\$ -	\$ -								
h. Project Amortization	\$ -	\$ -	\$ -	\$ -	\$ -								
i. Supplies	\$ 5,136	\$ 5,748	\$ 5,852	\$ 5,937	\$ 5,868	\$ 5,801	\$ 5,905	\$ 6,005	\$ 6,103	\$ 6,196	\$ 6,295	\$ 6,391	
j. Other Expenses (Specify/add rows if needed)	\$ 1,896	\$ 2,322	\$ 2,466	\$ 2,502	\$ 2,473	\$ 2,445	\$ 2,489	\$ 2,531	\$ 2,572	\$ 2,611	\$ 2,653	\$ 2,694	
TOTAL OPERATING EXPENSES	\$ 48,626	\$ 55,315	\$ 53,860	\$ 54,643	\$ 54,012	\$ 53,393	\$ 54,352	\$ 55,275	\$ 56,170	\$ 57,027	\$ 57,942	\$ 58,828	
3. INCOME													
a. Income From Operation	\$ 5,872	\$ 1,753	\$ 2,198	\$ 2,226	\$ 2,764	\$ 4,132	\$ 4,200	\$ 4,266	\$ 4,330	\$ 4,392	\$ 4,457	\$ 4,521	
b. Non-Operating Income	\$ 1,813	\$ 1,082	\$ 1,187	\$ 1,164	\$ 1,160	\$ 1,203	\$ 1,230	\$ 1,267	\$ 1,305	\$ 1,344	\$ 1,384	\$ 1,426	
SUBTOTAL	\$ 7,685	\$ 2,835	\$ 3,385	\$ 3,390	\$ 3,924	\$ 5,335	\$ 5,430	\$ 5,533	\$ 5,635	\$ 5,736	\$ 5,842	\$ 5,947	
c. Income Taxes	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -		
NET INCOME (LOSS)	\$ 7,685	\$ 2,835	\$ 3,385	\$ 3,390	\$ 3,924	\$ 5,335	\$ 5,430	\$ 5,533	\$ 5,635	\$ 5,736	\$ 5,842	\$ 5,947	

TABLE H2. REVENUES & EXPENSES, INFLATED - ENTIRE FACILITY - MWPH

INSTRUCTION: Complete this table for the entire facility, including the proposed project. Table H should reflect inflation. Projected revenues and expenses should be consistent with the projections in Table F. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.

	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending five years after completion) Add columns if needed.								
Indicate CY or FY	FY13	FY14	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
4. PATIENT MIX												
a. Percent of Total Revenue												
1) Medicare	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%
2) Medicaid	71.3%	71.3%	71.3%	71.3%	71.3%	71.3%	71.3%	71.3%	71.3%	71.3%	71.3%	71.3%
3) Blue Cross	12.7%	12.7%	12.7%	12.7%	12.7%	12.7%	12.7%	12.7%	12.7%	12.7%	12.7%	12.7%
4) Commercial Insurance	7.3%	7.3%	7.3%	7.3%	7.3%	7.3%	7.3%	7.3%	7.3%	7.3%	7.3%	7.3%
5) Self-pay	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
6) Other	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
b. Percent of Equivalent Inpatient Days												
Total MSGA												
1) Medicare	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%	0.2%
2) Medicaid	79.6%	79.6%	79.6%	79.6%	79.6%	79.6%	79.6%	79.6%	79.6%	79.6%	79.6%	79.6%
3) Blue Cross	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%	9.0%
4) Commercial Insurance	4.6%	4.6%	4.6%	4.6%	4.6%	4.6%	4.6%	4.6%	4.6%	4.6%	4.6%	4.6%
5) Self-pay	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
6) Other	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%	6.6%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Assumptions For CON Model - MWPH

PG Volume Assumptions

1. Inpatient volume assumptions are based on use rate: the number of admissions per projected Maryland population aged 0-4.
2. Use rate for FY 2014 is average of rate for FY 2013 and FY 2014.
Use rate for FY 2015 - FY 2023 is average of FY 2013 and FY 2014. Growth from FY 2014 is expected due to new waiver with population health model, encouraging hospitals to move patients to lower-cost settings. Increased admissions also
3. seen resulting from closer relationship between PG hospital and UMMS, of which MWPH is a part.
4. Average length of stay for FY 2015 is average of past five years.
Average length of stay for FY 2016 - FY 2023 grows at .25 days per year. Increase is expected due to new waiver with
5. population health model, encouraging hospitals to move patients more quickly to lower-cost settings.
Outpatient volumes assumptions are based on current demand. Rehabilitation and psychology are projected to double with
6. the availability of new space; clinic volumes are projected to remain stable.

Rogers Volume Assumptions

1. Inpatient volume assumptions are based on use rate: the number of admissions per projected Maryland population aged 0-4.
Use rate for FY 2015 is based on actual for FY 2014. Use rate was lower in FY 2012 and FY 2013 due to renovations to
2. largest patient unit. FY 2014 is first year with completed unit with greater capacity.
3. Use rate for FY 2015 - FY 2021 reflects this same higher use rate as in FY 2014, due to capacity and waiver model
4. Average length of stay for FY 2015 is average of past five years.
Average length of stay for FY 2016 - FY 2023 grows at .25 days per year. Increase is expected due to new waiver with
5. population health model, encouraging hospitals to move patients more quickly to lower-cost settings.
6. Outpatient volumes are projected to grow by 3% per year, consistent with current trends.

TABLE I. STATISTICAL PROJECTIONS - PROPOSED PROJECT - MWPH

INSTRUCTION: After consulting with Commission Staff, complete this table for the new facility or service (the proposed project). Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). For sections 4 & 5, the number of beds and occupancy percentage should be reported on the basis of licensed beds. In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.

	Projected Years (ending five years after completion) Add columns if needed.									
Indicate CY or FY	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
1. DISCHARGES										
a. General Medical/Surgical*										
b. ICU/CCU										
Total MSGA	0	0	0	0	0	0	0	0	0	0
c. Pediatric										
d. Obstetric										
e. Acute Psychiatric										
Total Acute	0	0	0	0	0	0	0	0	0	0
f. Rehabilitation										
g. Comprehensive Care										
h. Other (MWPH at PGHC/PGRMC)	114	115	116	116	117	118	118	118	119	119
TOTAL DISCHARGES	114	115	116	116	117	118	118	118	119	119
2. PATIENT DAYS										
a. General Medical/Surgical*										
b. ICU/CCU										
Total MSGA	0	0	0	0	0	0	0	0	0	0
c. Pediatric										
d. Obstetric										
e. Acute Psychiatric										
Total Acute	0	0	0	0	0	0	0	0	0	0
f. Rehabilitation										
g. Comprehensive Care										
h. Other (Specify/add rows of needed)	2,927	2,981	3,036	3,065	3,121	3,177	3,207	3,236	3,293	3,323
TOTAL PATIENT DAYS	2,927	2,981	3,036	3,065	3,121	3,177	3,207	3,236	3,293	3,323

TABLE I. STATISTICAL PROJECTIONS - PROPOSED PROJECT - MWPH

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	Projected Years (ending five years after completion) Add columns if needed.									
Indicate CY or FY	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
3. AVERAGE LENGTH OF STAY										
a. General Medical/Surgical*	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
b. ICU/CCU	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Total MSGA	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
c. Pediatric	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
d. Obstetric	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
e. Acute Psychiatric	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
Total Acute	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
f. Rehabilitation	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
g. Comprehensive Care	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!
h. Other (Specify/add rows of needed)	25.7	25.9	26.2	26.4	26.7	26.9	27.2	27.4	27.7	27.9
TOTAL AVERAGE LENGTH OF STAY	25.7	25.9	26.2	26.4	26.7	26.9	27.2	27.4	27.7	27.9

TABLE I. STATISTICAL PROJECTIONS - PROPOSED PROJECT - MWPH

INSTRUCTION: After consulting with Commission Staff, complete this table for the new facility or service (the proposed project). Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). For sections 4 & 5, the number of beds and occupancy percentage should be reported on the basis of licensed beds. In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.

	Projected Years (ending five years after completion) Add columns if needed.									
Indicate CY or FY	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
4. NUMBER OF LICENSED BEDS										
a. General Medical/Surgical*										
b. ICU/CCU										
Total MSGA	0	0	0	0	0	0	0	0	0	0
c. Pediatric										
d. Obstetric										
e. Acute Psychiatric										
Total Acute	0	0	0	0	0	0	0	0	0	0
f. Rehabilitation										
g. Comprehensive Care										
h. Other (Specify/add rows of needed)	15	15	15	15	15	15	15	15	15	15
TOTAL LICENSED BEDS	15	15	15	15	15	15	15	15	15	15
5. OCCUPANCY PERCENTAGE *IMPORTANT NOTE: Leap year formulas should be changed by applicant to reflect 366 days per year.										
a. General Medical/Surgical*										
b. ICU/CCU										
Total MSGA										
c. Pediatric										
d. Obstetric										
e. Acute Psychiatric										
Total Acute										
f. Rehabilitation										
g. Comprehensive Care										
h. Other (Specify/add rows of needed)	53.5%	54.5%	55.5%	56.0%	57.0%	58.0%	58.6%	59.1%	60.2%	60.5%
TOTAL OCCUPANCY %	53.5%	54.3%	55.5%	56.0%	57.0%	57.9%	58.6%	59.1%	60.2%	60.5%

TABLE I. STATISTICAL PROJECTIONS - PROPOSED PROJECT - MWPH

***INSTRUCTION:** After consulting with Commission Staff, complete this table for the new facility or service (the proposed project). Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). For sections 4 & 5, the number of beds and occupancy percentage should be reported on the basis of licensed beds. In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. See additional instruction in the column to the right of the table.*

	Projected Years (ending five years after completion) Add columns if needed.									
Indicate CY or FY	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
6. OUTPATIENT VISITS										
a. Emergency Department										
b. Same-day Surgery										
c. Laboratory										
d. Imaging										
e. Other (Specify/add rows of needed)*										
Clinic	749	749	749	749	749	749	749	749	749	749
Rehabilitation	2,068	2,068	2,068	2,068	2,068	3,102	3,619	4,136	4,136	4,136
Psychology	605	605	605	605	605	908	1,059	1,210	1,210	1,210
Total	3,422	3,422	3,422	3,422	3,422	4,759	5,427	6,095	6,095	6,095
7. OBSERVATIONS**										
a. Number of Patients	MWPH HAS NO OBSERVATION PATIENTS									
b. Hours										

*Include beds dedicated to gynecology and addictions, if separate for acute psychiatric unit.

** Services included in the reporting of the "Observation Center", direct expenses incurred in providing bedside care to observation patients; furnished by the hospital on the hospital's premises, including use of a bed and periodic monitoring by the hospital's nursing or other staff, in order to determine the need for a possible admission to the hospitals as an inpatient. Such services must be ordered and documented in writing, given by a medical practitioner; may or may not be provided in a distinct area of the hospital.

TABLE J. REVENUES & EXPENSES, UNINFLATED - NEW FACILITY OR SERVICE - MWPH

INSTRUCTION : After consulting with Commission Staff, complete this table for the new facility or service (the proposed project). Table J should reflect current dollars (no inflation). Projected revenues and expenses should be consistent with the projections in Table I and with the costs of Manpower listed in Table L. Manpower. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. Specify the sources of non-operating income.

	Projected Years (ending five years after completion) Add columns of needed.									
Indicate CY or FY	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
1. REVENUE										
a. Inpatient Services	\$ 4,713	\$ 4,801	\$ 4,890	\$ 4,936	\$ 5,026	\$ 5,116	\$ 5,164	\$ 5,211	\$ 5,303	\$ 5,351
b. Outpatient Services	\$ 1,786	\$ 1,786	\$ 1,786	\$ 1,786	\$ 1,786	\$ 2,484	\$ 2,832	\$ 3,181	\$ 3,181	\$ 3,181
Gross Patient Service Revenues	\$ 6,499	\$ 6,587	\$ 6,676	\$ 6,722	\$ 6,812	\$ 7,600	\$ 7,996	\$ 8,392	\$ 8,485	\$ 8,532
c. Allowance For Bad Debt	\$ 65	\$ 66	\$ 67	\$ 67	\$ 68	\$ 76	\$ 80	\$ 84	\$ 85	\$ 85
d. Contractual Allowance	\$ 422	\$ 428	\$ 434	\$ 437	\$ 443	\$ 494	\$ 520	\$ 546	\$ 551	\$ 555
e. Charity Care	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Net Patient Services Revenue	\$ 6,012	\$ 6,093	\$ 6,175	\$ 6,218	\$ 6,301	\$ 7,030	\$ 7,396	\$ 7,763	\$ 7,848	\$ 7,893
f. Other Operating Revenues (Specify/add rows of needed)	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168
NET OPERATING REVENUE	\$ 6,180	\$ 6,261	\$ 6,343	\$ 6,386	\$ 6,469	\$ 7,198	\$ 7,564	\$ 7,931	\$ 8,016	\$ 8,061
2. EXPENSES										
a. Salaries & Wages (including benefits)	\$ 3,736	\$ 3,832	\$ 3,928	\$ 4,229	\$ 4,531	\$ 4,627	\$ 4,723	\$ 4,819	\$ 4,915	\$ 5,011
b. Contractual Services	\$ 122	\$ 124	\$ 125	\$ 127	\$ 129	\$ 149	\$ 157	\$ 165	\$ 167	\$ 168
c. Interest on Current Debt	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d. Interest on Project Debt	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
e. Current Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
f. Project Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
g. Current Amortization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
h. Project Amortization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
i. Supplies	\$ 1,091	\$ 1,106	\$ 1,121	\$ 1,137	\$ 1,150	\$ 1,329	\$ 1,405	\$ 1,476	\$ 1,493	\$ 1,502
j. Other Expenses (Specify/add rows of needed)	\$ 137	\$ 139	\$ 141	\$ 266	\$ 269	\$ 311	\$ 328	\$ 345	\$ 349	\$ 351
TOTAL OPERATING EXPENSES	\$ 5,086	\$ 5,201	\$ 5,315	\$ 5,759	\$ 6,078	\$ 6,415	\$ 6,613	\$ 6,806	\$ 6,924	\$ 7,032

TABLE J. REVENUES & EXPENSES, UNINFLATED - NEW FACILITY OR SERVICE - MWPH

INSTRUCTION : After consulting with Commission Staff, complete this table for the new facility or service (the proposed project). Table J should reflect current dollars (no inflation). Projected revenues and expenses should be consistent with the projections in Table I and with the costs of Manpower listed in Table L. Manpower. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable. Specify the sources of non-operating income.

	Projected Years (ending five years after completion) Add columns of needed.									
Indicate CY or FY	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
3. INCOME										
a. Income From Operation	\$ 1,094	\$ 1,061	\$ 1,028	\$ 627	\$ 391	\$ 783	\$ 951	\$ 1,126	\$ 1,092	\$ 1,029
b. Non-Operating Income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SUBTOTAL	\$ 1,094	\$ 1,061	\$ 1,028	\$ 627	\$ 391	\$ 783	\$ 951	\$ 1,126	\$ 1,092	\$ 1,029
c. Income Taxes	\$ -									
NET INCOME (LOSS)	\$ 1,094	\$ 1,061	\$ 1,028	\$ 627	\$ 391	\$ 783	\$ 951	\$ 1,126	\$ 1,092	\$ 1,029
4. PATIENT MIX										
a. Percent of Total Revenue										
1) Medicare	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%
2) Medicaid	79.9%	79.9%	79.9%	79.9%	79.9%	79.9%	79.9%	79.9%	79.9%	79.9%
3) Blue Cross	11.1%	11.1%	11.1%	11.1%	11.1%	11.1%	11.1%	11.1%	11.1%	11.1%
4) Commercial Insurance	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%
5) Self-pay	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
6) Other	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
b. Percent of Equivalent Inpatient Days										
1) Medicare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
2) Medicaid	84.9%	84.9%	84.9%	84.9%	84.9%	84.9%	84.9%	84.9%	84.9%	84.9%
3) Blue Cross	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%
4) Commercial Insurance	6.3%	6.3%	6.3%	6.3%	6.3%	6.3%	6.3%	6.3%	6.3%	6.3%
5) Self-pay	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
6) Other	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

TABLE K. REVENUES & EXPENSES, INFLATED - NEW FACILITY OR SERVICE - MWPH

INSTRUCTION : After consulting with Commission Staff, complete this table for the new facility or service (the proposed project). Table K should reflect inflation. Projected revenues and expenses should be consistent with the projections in Table I. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable.

	Projected Years (ending five years after completion) Add columns of needed.									
Indicate CY or FY	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
1. REVENUE										
a. Inpatient Services	\$ 4,784	\$ 4,873	\$ 4,963	\$ 5,010	\$ 5,101	\$ 5,193	\$ 5,241	\$ 5,290	\$ 5,383	\$ 5,432
b. Outpatient Services	\$ 1,813	\$ 1,813	\$ 1,813	\$ 1,813	\$ 1,813	\$ 2,521	\$ 2,875	\$ 3,229	\$ 3,229	\$ 3,229
Gross Patient Service Revenues	\$ 6,597	\$ 6,686	\$ 6,776	\$ 6,823	\$ 6,914	\$ 7,714	\$ 8,116	\$ 8,518	\$ 8,612	\$ 8,660
c. Allowance For Bad Debt	\$ 66	\$ 67	\$ 68	\$ 68	\$ 69	\$ 77	\$ 81	\$ 85	\$ 86	\$ 87
d. Contractual Allowance	\$ 429	\$ 435	\$ 440	\$ 444	\$ 449	\$ 501	\$ 528	\$ 554	\$ 560	\$ 563
e. Charity Care	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
Net Patient Services Revenue	\$ 6,102	\$ 6,184	\$ 6,268	\$ 6,311	\$ 6,396	\$ 7,135	\$ 7,507	\$ 7,879	\$ 7,966	\$ 8,011
f. Other Operating Revenues (Specify/add rows of needed)	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168	\$ 168
NET OPERATING REVENUE	\$ 6,270	\$ 6,352	\$ 6,436	\$ 6,479	\$ 6,564	\$ 7,303	\$ 7,675	\$ 8,047	\$ 8,134	\$ 8,179
2. EXPENSES										
a. Salaries & Wages (including benefits)	\$ 3,829	\$ 3,928	\$ 4,027	\$ 4,335	\$ 4,644	\$ 4,742	\$ 4,841	\$ 4,939	\$ 5,038	\$ 5,137
b. Contractual Services	\$ 125	\$ 127	\$ 128	\$ 130	\$ 132	\$ 152	\$ 161	\$ 169	\$ 171	\$ 172
c. Interest on Current Debt	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
d. Interest on Project Debt	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
e. Current Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
f. Project Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
g. Current Amortization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
h. Project Amortization	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
i. Supplies	\$ 1,118	\$ 1,134	\$ 1,149	\$ 1,165	\$ 1,179	\$ 1,362	\$ 1,440	\$ 1,513	\$ 1,530	\$ 1,539
j. Other Expenses (Specify/add rows of needed)	\$ 140	\$ 142	\$ 144	\$ 272	\$ 276	\$ 318	\$ 337	\$ 354	\$ 358	\$ 360
TOTAL OPERATING EXPENSES	\$ 5,213	\$ 5,331	\$ 5,448	\$ 5,903	\$ 6,230	\$ 6,575	\$ 6,779	\$ 6,976	\$ 7,097	\$ 7,207

TABLE K. REVENUES & EXPENSES, INFLATED - NEW FACILITY OR SERVICE - MWPH

INSTRUCTION : After consulting with Commission Staff, complete this table for the new facility or service (the proposed project). Table K should reflect inflation. Projected revenues and expenses should be consistent with the projections in Table I. Indicate on the table if the reporting period is Calendar Year (CY) or Fiscal Year (FY). In an attachment to the application, provide an explanation or basis for the projections and specify all assumptions used. Applicants must explain why the assumptions are reasonable.

	Projected Years (ending five years after completion) Add columns of needed.									
Indicate CY or FY	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23	FY24
3. INCOME										
a. Income From Operation	\$ 1,057	\$ 1,022	\$ 987	\$ 576	\$ 333	\$ 728	\$ 897	\$ 1,072	\$ 1,037	\$ 972
b. Non-Operating Income	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
SUBTOTAL	\$ 1,057	\$ 1,022	\$ 987	\$ 576	\$ 333	\$ 728	\$ 897	\$ 1,072	\$ 1,037	\$ 972
c. Income Taxes	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -	\$ -
NET INCOME (LOSS)	\$ 1,057	\$ 1,022	\$ 987	\$ 576	\$ 333	\$ 728	\$ 897	\$ 1,072	\$ 1,037	\$ 972
4. PATIENT MIX										
a. Percent of Total Revenue										
1) Medicare	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%	0.4%
2) Medicaid	79.9%	79.9%	79.9%	79.9%	79.9%	79.9%	79.9%	79.9%	79.9%	79.9%
3) Blue Cross	11.1%	11.1%	11.1%	11.1%	11.1%	11.1%	11.1%	11.1%	11.1%	11.1%
4) Commercial Insurance	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%	3.7%
5) Self-pay	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
6) Other	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%	4.9%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%
b. Percent of Equivalent Inpatient Days										
1) Medicare	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
2) Medicaid	84.9%	84.9%	84.9%	84.9%	84.9%	84.9%	84.9%	84.9%	84.9%	84.9%
3) Blue Cross	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%	8.2%
4) Commercial Insurance	6.3%	6.3%	6.3%	6.3%	6.3%	6.3%	6.3%	6.3%	6.3%	6.3%
5) Self-pay	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%	0.0%
6) Other	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%	0.6%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

TABLE L1. MANPOWER INFORMATION - DIMENSIONS

INSTRUCTION : List the facility's existing staffing and changes required by this project. Include all major job categories under each heading provided in the table. The number of Full Time Equivalents (FTEs) should be calculated on the basis of 2,080 paid hours per year equals one FTE. In an attachment to the application, explain any factor used in converting paid hours to worked hours. Please ensure that the projections in this table are consistent with expenses provided in uninflated projections in Tables G and J. See additional instruction in the column to the right of the table.

Job Category	CURRENT ENTIRE FACILITY - FY2015			PROJECTED CHANGES AS A RESULT OF THE PROPOSED PROJECT THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS)			OTHER EXPECTED CHANGES IN OPERATIONS THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS)			PROJECTED ENTIRE FACILITY THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS) * - FY2022		
	Current Year FTEs	Average Salary per FTE	Current Year Total Cost	FTEs	Average Salary per FTE	Total Cost (should be consistent with projections in Table J)	FTEs	Average Salary per FTE	Total Cost	FTEs	Average Salary per FTE	Total Cost (should be consistent with projections in Table G)
1. Regular Employees												
Administration (List general categories, add rows if needed)												
Executive Office/Administration												
120854000 PHYSICIAN ASSISTANTS	20.6	\$ 97,907	\$ 2,017,873	-	\$ -	\$ -	-	\$ -	-	20.61	\$ 97,907	\$ 2,017,873
120901000 EXECUTIVE OFFICES	3.4	169,765	577,200	-	-	-	-	-	-	3.40	169,765	577,200
120910000 COMMUNICATIONS	9.6	32,111	308,590	-	-	-	-	-	-	9.61	32,111	308,590
Total - Executive Office/Administration	33.6	86,367	2,903,663	-	-	-	-	-	-	33.62	86,367	2,903,663
Corporate Allocations/Overhead - Direct & Indirect												
120999000 CORPORATE ALLOCATION	133.5	78,039	10,420,582	-	-	-	-	-	-	133.53	78,039	10,420,582
120900000 ADMIN AND GENERAL	(10.0)	48,441	(484,407)	-	-	-	-	-	-	(10.00)	48,441	(484,407)
Corporate Allocations/Overhead - Direct & Indirect	123.5	80,435	9,936,175	-	-	-	-	-	-	123.53	80,435	9,936,175
Fiscal Services												
120903000 REGISTRATION	23.6	37,053	875,571	-	-	-	-	-	-	23.63	37,053	875,571
120970000 HEALTH INFO MGT(MED RECOR	32.7	56,791	1,859,363	-	-	-	-	-	-	32.74	56,791	1,859,363
Total - Fiscal Services	56.4	48,517	2,734,934	-	-	-	-	-	-	56.37	48,517	2,734,934
Medical Affairs												
120855000 INTERNAL MEDICINE	44.0	50,824	2,236,275	-	-	-	-	-	-	44.0	50,824	2,236,275
120856000 MEDICAL AFFAIRS OFFICE	9.0	56,847	511,625	-	-	-	-	-	-	9.0	56,847	511,625
120975000 CASE MANAGEMENT	26.0	87,405	2,274,272	-	-	-	-	-	-	26.0	87,405	2,274,272
Total - Medical Affairs	79.0	63,556	5,022,172	-	-	-	-	-	-	79.0	63,556	5,022,172
Quality Affairs												
120603000 INFECTION CONTROL	2.8	97,907	275,120	-	-	-	-	-	-	2.8	97,907	275,120
120852000 CLINICAL DOCUMENTATION	7.6	82,739	628,815	-	-	-	-	-	-	7.6	82,739	628,815
120857000 RISK MANAGEMENT	1.0	88,160	88,160	-	-	-	-	-	-	1.0	88,160	88,160
120859000 QUALITY IMPROVEMENT	9.3	83,728	778,670	-	-	-	-	-	-	9.3	83,728	778,670
Total - Quality Affairs	20.7	85,503	1,770,765	-	-	-	-	-	-	20.7	85,503	1,770,765
Total Administration	313.3	71,405	22,367,709	-	-	-	-	-	-	313.3	71,405	22,367,709
Direct Care Staff (List general categories, add rows if needed)												
Nursing												
120600000 NURSING ADMINISTRATION	4.0	90,183	360,730	0.4	90,183	39,043	(0.4)	90,183	(39,224)	4.4	81,334	360,549
120600200 INPATIENT OPERATIONS	8.0	109,759	878,073	0.9	109,759	95,038	(0.9)	109,759	(95,478)	8.9	98,990	877,633
120601000 ON CALL FLOAT POOL	23.0	58,151	1,338,060	2.5	58,151	144,824	(2.5)	58,151	(145,495)	25.5	52,446	1,337,389
120601200 NURSING INTERNSHIP/GRADS	2.1	67,919	142,630	0.2	67,919	15,437	(0.2)	67,919	(15,509)	2.3	61,255	142,558
120928000 CLINICAL EDUCATION	6.0	84,615	507,687	0.6	84,615	54,949	(0.7)	84,615	(55,204)	6.6	76,312	507,432
120603500 PATIENT TRANSPORT	8.4	32,002	268,497	0.9	32,002	29,061	(0.9)	32,002	(29,195)	9.3	28,862	268,362
120611000 NURSING E 900 (MS-TELE/ON	63.1	65,888	4,158,214	6.8	65,888	450,061	(6.9)	65,888	(452,147)	69.9	59,423	4,156,128
120612000 NURSING E 700 (MS-TELE)	30.5	65,633	2,003,079	3.3	65,633	216,802	(3.3)	65,633	(217,806)	33.8	59,193	2,002,074
120612500 NURSING E-800 (MS-ORTHO/T	58.6	66,333	3,887,810	6.3	66,333	420,794	(6.4)	66,333	(422,744)	65.0	59,824	3,885,860
120624000 NURSING K400 - PCRU	50.0	63,884	3,194,222	5.4	63,884	345,724	(5.4)	63,884	(347,326)	55.4	57,616	3,192,620
120640000 NURSING E 600 PEDIATRICS	8.8	83,590	735,595	1.0	83,590	79,617	(1.0)	83,590	(79,985)	9.8	75,389	735,226
120651000 NURSING K 200 - ANTE/POST	48.6	73,990	3,597,377	5.3	73,990	389,359	(5.3)	73,990	(391,164)	53.9	66,731	3,595,573
120660000 NURSING - CCU	23.5	76,238	1,790,854	2.5	76,238	193,832	(2.6)	76,238	(194,730)	26.0	68,758	1,789,956
120663000 NURSING - ICU/CCC	88.9	73,832	6,564,445	9.6	73,832	710,497	(9.7)	73,832	(713,790)	98.5	66,588	6,561,153
120666000 NURSING - PSYCH	36.5	68,285	2,493,776	4.0	68,285	269,912	(4.0)	68,285	(271,163)	40.5	61,585	2,492,525
120672000 NURSING - NICU	29.2	82,216	2,399,896	3.2	82,216	259,751	(3.2)	82,216	(260,955)	32.3	74,150	2,398,692
120701000 OPERATING ROOM	41.9	67,965	2,849,080	4.5	67,965	308,368	(4.6)	67,965	(309,797)	46.5	61,296	2,847,651
120704000 POST ANESTHESIA CARE UNIT	13.9	81,778	1,137,534	1.5	81,778	123,120	(1.5)	81,778	(123,691)	15.4	73,754	1,136,963
120706000 SAME DAY SURGERY	5.5	66,107	365,569	0.6	66,107	39,567	(0.6)	66,107	(39,750)	6.1	59,620	365,386
120707000 TRANS CARE	3.8	82,399	313,117	0.4	82,399	33,890	(0.4)	82,399	(34,047)	4.2	74,315	312,960
120708000 LABOR AND DELIVERY	43.2	72,145	3,117,462	4.7	72,145	337,416	(4.7)	72,145	(338,980)	47.9	65,066	3,115,898
120718000 CENTRAL STERILE PROCESSING	7.6	37,364	283,970	0.8	37,364	30,735	(0.8)	37,364	(30,878)	8.4	33,698	283,828
120724000 ANESTHESIOLOGY	4.0	46,689	186,754	0.4	46,689	20,213	(0.4)	46,689	(20,307)	4.4	42,108	186,660
120725000 HEMODIALYSIS	7.3	79,478	580,189	0.8	79,478	62,796	(0.8)	79,478	(63,087)	8.1	71,680	579,898
120744000 CARDIOLOGY	7.4	74,653	554,670	0.8	74,653	60,034	(0.8)	74,653	(60,312)	8.2	67,328	554,392
120746000 CARDIAC CATH LAB	9.9	94,028	933,697	1.1	94,028	101,058	(1.1)	94,028	(101,526)	11.0	84,802	933,229
120763100 CARDIAC REHAB	2.2	80,215	176,473	0.2	80,215	19,100	(0.2)	80,215	(19,189)	2.4	72,345	176,384
120770000 PSYCH-PARTIAL HOSPITALIZA	2.7	65,359	176,469	0.3	65,359	19,100	(0.3)	65,359	(19,188)	3.0	58,946	176,380
120771100 SMOKING CESSATION	1.2	51,495	61,794	0.1	51,495	6,688	(0.1)	51,495	(6,719)	1.3	46,443	61,763
120772000 EMERGENCY PSYCH SERVICE-E	12.0	69,538	833,065	1.3	69,538	90,166	(1.3)	69,538	(90,584)	13.3	62,715	832,647
120775000 HIV GRANTS	2.0	61,344	122,687	0.2	61,344	13,279	(0.2)	61,344	(13,340)	2.2	55,325	122,625
120781000 PERINATAL DIAGNOSTIC CTR	3.0	70,778	213,751	0.3	70,778	23,135	(0.3)	70,778	(23,242)	3.3	63,834	213,644
120783200 SPECIAL PROCEDURES	4.6	63,539	292,279	0.5	63,539	31,635	(0.5)	63,539	(31,781)	5.1	57,305	292,132
120743000 CARDIAC PROGRAM	2.5	108,123	271,388	0.3	108,123	29,373	(0.3)	108,123	(29,510)	2.8	97,514	271,252
120926000 CUSTOMER SERVICE	1.0	64,524	64,524	0.1	64,524	6,984	(0.1)	64,524	(7,016)	1.1	58,193	64,492
Total - Nursing	665.1	70,447	46,855,417	72.0	70,447	5,071,359	(72.3)	70,447	(5,094,860)	737.1	63,535	46,831,916
Ambulatory Care & Ancillary Services												
120710000 PHARMACY	39.0	87,192	3,400,543	4.2	87,192	368,055	(4.2)	87,192	(369,761)	43.2	78,637	3,398,837
120719000 PATHOLOGY ADMINISTRATION	48.2	62,695	3,018,773	5.2	62,695	326,734	(5.2)	62,695	(328,249)	53.4	56,544	3,017,259
120722000 ANGIOGRAPHY	2.5	94,922	238,253	0.3	94,922	25,787	(0.3)	94,922	(25,907)	2.8	85,608	238,134
120728000 RADIOLOGY	31.5	63,622	2,001,549	3.4	63,622	216,636	(3.4)	63,622	(217,640)	34.9	57,380	2,000,545
120729000 ULTRASOUND	8.5	71,524	607,951	0.9	71,524	65,801	(0.9)	71,524	(66,106)	9.4	64,506	607,646

Job Category	CURRENT ENTIRE FACILITY - FY2015			PROJECTED CHANGES AS A RESULT OF THE PROPOSED PROJECT THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS)			OTHER EXPECTED CHANGES IN OPERATIONS THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS)			PROJECTED ENTIRE FACILITY THROUGH THE LAST YEAR OF PROJECTION (CURRENT DOLLARS) * - FY2022		
	Current Year FTEs	Average Salary per FTE	Current Year Total Cost	FTEs	Average Salary per FTE	Total Cost (should be consistent with projections in Table J)	FTEs	Average Salary per FTE	Total Cost	FTEs	Average Salary per FTE	Total Cost (should be consistent with projections in Table G)
120730000 CAT SCAN	7.8	77,708	607,674	0.8	77,708	65,771	(0.9)	77,708	(66,076)	8.7	70,083	607,369
120853000 FAMILY MEDICINE PROGRAM	6.5	54,273	352,772	0.7	54,273	38,182	(0.7)	54,273	(38,359)	7.2	48,948	352,595
120732000 NUCLEAR MEDICINE	2.5	110,816	278,147	0.3	110,816	30,105	(0.3)	110,816	(30,245)	2.8	99,943	278,007
120745000 PULMONARY FUNCTION	1.1	85,231	93,754	0.1	85,231	10,147	(0.1)	85,231	(10,194)	1.2	76,868	93,707
120748000 ELECTROENCEPHALOGRAPHY	1.0	87,709	87,709	0.1	87,709	9,493	(0.1)	87,709	(9,537)	1.1	79,103	87,665
120752000 RESPIRATORY THERAPY	28.9	77,476	2,239,866	3.1	77,476	242,430	(3.1)	77,476	(243,554)	32.0	69,875	2,238,743
120760000 PHYSICAL MEDICINE	9.5	69,470	660,661	1.0	69,470	71,506	(1.0)	69,470	(71,837)	10.5	62,654	660,330
120761000 OCCUPATIONAL THERAPY	3.5	83,510	292,286	0.4	83,510	31,635	(0.4)	83,510	(31,782)	3.9	75,317	292,139
120762000 SPEECH THERAPY	2.0	86,795	173,590	0.2	86,795	18,788	(0.2)	86,795	(18,875)	2.2	78,279	173,503
Total - Ambulatory Care & Ancillary Services	192.5	73,016	14,053,528	20.8	73,016	1,521,072	(20.9)	73,016	(1,528,121)	213.3	65,852	14,046,479
Emergency Services												
120769000 SEXUAL ASSAULT CENTER	8.8	75,871	668,451	1.0	75,871	72,349	(1.0)	75,871	(72,685)	9.8	68,427	668,116
120774000 EMERGENCY SERVICES	83.5	66,165	5,524,808	9.0	66,165	597,973	(9.1)	66,165	(600,744)	92.5	59,673	5,522,037
Total - Emergency Services	92.3	67,091	6,193,259	10.0	67,091	670,322	(10.0)	67,091	(673,429)	102.3	60,509	6,190,153
New Clinical Departments												
Cancer	-	-	-	13.0	69,696	906,048	-	-	-	13.0	69,696	906,048
Total - New Departments	-	-	-	13.0	69,696	906,048	-	-	-	13.0	69,696	906,048
Total Direct Care	949.9	70,642	67,102,204	115.8	70,536	8,168,802	(103.3)	70,642	(7,296,409)	1,065.7	63,784	67,974,596
Support Staff (List general categories, add rows if needed)												
Support Services												
120930000 FOOD SERVICES	55.4	37,362	2,069,857	-	-	-	(6.0)	37,362	(225,067)	55.4	33,299	1,844,790
120940000 ENVIRONMENTAL SERVICES	80.0	31,930	2,554,729	-	-	-	(8.7)	31,930	(277,790)	80.0	28,458	2,276,939
120963000 CLINICAL ENGINEERING	7.0	72,012	504,083	-	-	-	(0.8)	72,012	(54,812)	7.0	64,182	449,271
120964000 MAINTENANCE	23.4	57,300	1,341,977	-	-	-	(2.5)	57,300	(145,921)	23.4	51,070	1,196,056
Total - Support Services	192.0	33,696	6,470,646	-	-	-	(18.0)	39,020	(703,591)	192.0	30,032	5,767,055
Total Support	192.0	33,696	6,470,646	-	-	-	(18.0)	39,020	(703,591)	192.0	30,032	5,767,055
REGULAR EMPLOYEES TOTAL SALARIES	1,455.2	\$ 65,931	\$ 95,940,559	115.8	\$ 70,536	\$ 8,168,802	(121.3)	\$ 65,942	(8,000,000)	1,571.0	\$ 61,178	\$ 96,109,361
ADDITIONAL PREMIUM \$ PER FTE @ 3.4% OF SALARIES AND BENEFITS			4,161,837									4,169,160
BENEFITS												
Calculated @ 28.9% OF SALARIES			27,720,054									27,768,826
TOTAL COST			\$ 127,822,450									\$ 128,047,346

* The projected FTEs and cost for the entire facility should equal the current number of FTEs and cost plus changes in FTEs and cost related to the proposed project plus other expected changes in staffing.

TABLE L2. MANPOWER - MWPH

INSTRUCTION: List the facility's existing staffing and changes required by this project. Include all major job categories under each heading provided in the table. The number of Full Time Equivalents (FTEs) should be calculated on the basis of 2,080 paid hours

Job Category	CURRENT ENTIRE FACILITY			PROJECTED CHANGES AS A RESULT OF THE			OTHER EXPECTED CHANGES IN			PROJECTED ENTIRE FACILITY THROUGH		Additional Instruction
	Current Year FTEs	Average Salary per FTE	Current Year Total Cost	FTEs	Average Salary per FTE	Total Cost (should be consistent with projections in Table J)	FTEs	Average Salary per FTE	Total Cost	FTEs	Total Cost (should be consistent with projections in Table G)	
1. Regular Employees												
Administration (List general categories, add rows if needed)												
Site Manager	1.0	\$85,000	\$85,000	0.0	\$85,000	\$0			\$0	1.0	\$85,000	
Unit Clerk	1.0	\$34,495	\$34,495	0.0	\$34,495	\$0			\$0	1.0	\$34,495	
Outpatient clerical	1.0	\$40,467	\$40,467	0.8	\$40,467	\$30,351			\$0	1.8	\$70,818	
Total Administration			\$159,962	0.8		\$30,351			\$0	0.8	\$190,313	Calculate the sum of Administration
Direct Care Staff (List general categories, add rows if needed)												
RN	13.2	\$86,333	\$1,139,596	2.6	\$86,333	\$224,466			\$0	15.8	\$1,364,061	
CNAs	0.1	\$35,339	\$3,534	0.1	\$35,339	\$3,534				0.2	\$7,068	
PT	0.9	\$89,921	\$83,177	0.9	\$89,921	\$83,177				1.9	\$166,354	
OT	0.9	\$92,824	\$78,900	0.9	\$92,824	\$78,900				1.7	\$157,801	
SP	0.9	\$101,107	\$85,941	0.9	\$101,107	\$85,941				1.7	\$171,882	
Psych	1.0	\$95,193	\$95,193	1.0	\$95,193	\$95,193				2.0	\$190,386	
Medicine	6.6	\$179,812	\$1,186,759	2.0	\$179,812	\$359,624				8.6	\$1,546,383	
Outpatient RN	1.0	\$71,846	\$71,846	0.3	\$71,846	\$17,961				1.3	\$89,807	
Outpatient PCA	0.5	\$34,408	\$17,204	0.4	\$34,408	\$13,763				0.9	\$30,967	
Total Direct Care			\$2,762,150	9.0		\$962,560			\$0	9.0	\$3,724,710	Calculate the sum of Direct Care
Support Staff (List general categories, add rows if needed)												
Social Work	1.0	\$67,621	\$67,621	0.3	\$67,621	\$22,096			\$0	1.3	\$89,717	
Child Life	0.3	\$38,996	\$9,749	0.2	\$38,996	\$6,851			\$0	0.4	\$16,600	
Dietary	0.3	\$57,900	\$14,475	0.2	\$57,900	\$11,580			\$0	0.5	\$26,055	
Total Support			\$91,845	0.7		\$40,526.6			\$0	0.7	\$132,372	Calculate the sum of Administration Support Staff
REGULAR EMPLOYEES TOTAL			\$3,013,957	10.4		\$1,033,436.7			\$0	10.4	\$4,047,394	Calculate the sum of Administration, Direct Care, and Support Staff
2. Contractual Employees												
Administration (List general categories, add rows if needed)												
Total Administration			\$0			\$0			\$0	0.0	\$0	Calculate the sum of Administration
Direct Care Staff (List general categories, add rows if needed)												
Respiratory Therapy	0.9	\$99,193	\$90,609	0.3	\$99,193	\$31,836			\$0	1.2	\$122,445	
Total Direct Care Staff			\$90,609			\$31,836			\$0	0.0	\$122,445	Calculate the sum of Direct Care
Support Staff (List general categories, add rows if needed)												
Total Support Staff			\$0			\$0			\$0	0.0	\$0	Calculate the sum of Administration Support Staff
CONTRACTUAL EMPLOYEES TOTAL			\$90,609			\$31,836			\$0	0.0	\$122,445	Calculate the sum of Administration, Direct Care, and Support Staff
Benefits (State method of calculating benefits below)			753,489			258,359			-		\$1,011,848	
0.25												Include the method of calculating benefits in green field at far left
TOTAL COST	0.0		\$3,858,055	10.4		\$1,323,632	0.0		\$0		\$5,181,687	Ensure that the sums and Total Cost of Regular Employees Total and Contractual Employee are correct