

TABLE G. REVENUES & EXPENSES, UNINFLATED - ENTIRE FACILITY

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.

All Measurements are in Thousands	Two Most Recent Years (Actual)		Current Year Projected	Projected Years (ending at least two years after project completion and full occupancy) Add columns if needed in order to document that the hospital will generate excess revenues over total expenses consistent with the Financial Feasibility standard.					
	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23
1. REVENUE									
a. Inpatient Services	\$ 193,449	\$ 193,656	\$ 196,539	\$ 212,073	\$ 223,732	\$ 235,734	\$ 244,699	\$ 253,918	\$ 263,030
b. Outpatient Services	\$ 104,856	\$ 110,485	\$ 117,777	\$ 112,207	\$ 115,583	\$ 119,436	\$ 123,289	\$ 127,257	\$ 131,333
Gross Patient Service Revenues	\$ 298,305	\$ 304,142	\$ 314,316	\$ 324,280	\$ 339,315	\$ 355,171	\$ 367,988	\$ 381,175	\$ 394,363
c. Allowance For Bad Debt	\$ 7,755	\$ 2,947	\$ 6,079	\$ 4,693	\$ 6,090	\$ 4,987	\$ 5,148	\$ 5,313	\$ 5,483
d. Contractual Allowance	\$ 35,609	\$ 34,866	\$ 36,196	\$ 37,814	\$ 39,752	\$ 41,768	\$ 43,320	\$ 44,917	\$ 46,504
e. Charity Care	\$ 4,093	\$ 3,294	\$ 3,204	\$ 4,864	\$ 5,007	\$ 5,170	\$ 5,336	\$ 5,507	\$ 5,683
Net Patient Services Revenue	\$ 250,848	\$ 263,035	\$ 268,837	\$ 276,909	\$ 288,466	\$ 303,246	\$ 314,184	\$ 325,438	\$ 336,694
f. Other Operating Revenues (Specify/add rows if needed)	\$ 24,257	\$ 24,353	\$ 26,496	\$ 24,520	\$ 24,049	\$ 23,840	\$ 24,448	\$ 25,239	\$ 26,103
NET OPERATING REVENUE	\$ 275,105	\$ 287,388	\$ 295,333	\$ 301,430	\$ 312,515	\$ 327,086	\$ 338,632	\$ 350,677	\$ 362,797
2. EXPENSES									
a. Salaries & Wages (including benefits)	\$ 116,317	\$ 119,706	\$ 126,616	\$ 129,670	\$ 133,921	\$ 139,509	\$ 144,312	\$ 149,395	\$ 154,790
b. Contractual Services	\$ 66,255	\$ 67,440	\$ 69,180	\$ 70,351	\$ 74,586	\$ 77,145	\$ 80,005	\$ 83,232	\$ 86,271
c. Interest on Current Debt	\$ 824	\$ 588	\$ 1,675	\$ 3,050	\$ 0	\$ 3,930	\$ 4,909	\$ 4,804	\$ 4,695
d. Interest on Project Debt	\$ -	\$ -	\$ -						
e. Current Depreciation	\$ 15,820	\$ 15,711	\$ 13,192	\$ 15,867	\$ 16,268	\$ 23,085	\$ 22,334	\$ 21,742	\$ 20,872
f. Project Depreciation	\$ -	\$ -	\$ -						
g. Current Amortization	\$ -	\$ -	\$ -						
h. Project Amortization	\$ -	\$ -	\$ -						
i. Supplies & Drugs	\$ 63,664	\$ 67,014	\$ 71,644	\$ 67,657	\$ 70,683	\$ 74,199	\$ 77,410	\$ 80,738	\$ 84,142
j. Other Expenses (Specify/add rows if needed)	\$ -	\$ -	\$ -	\$ (5,147)	\$ (3,225)	\$ (3,757)	\$ (5,664)	\$ (6,739)	\$ (7,945)
TOTAL OPERATING EXPENSES	\$ 262,880	\$ 270,459	\$ 282,307	\$ 281,448	\$ 292,232	\$ 314,111	\$ 323,305	\$ 333,171	\$ 342,825

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	FY15	FY16	FY17	FY18	FY19	FY20	FY21	FY22	FY23
3. INCOME									
a. Income From Operation	\$ 12,225	\$ 16,929	\$ 13,027	\$ 19,981	\$ 20,282	\$ 12,975	\$ 15,327	\$ 17,506	\$ 19,972
b. Non-Operating Income									
SUBTOTAL	\$ 12,225	\$ 16,929	\$ 13,027	\$ 19,981	\$ 20,282	\$ 12,975	\$ 15,327	\$ 17,506	\$ 19,972
c. Income Taxes									
NET INCOME (LOSS)	\$ 12,225	\$ 16,929	\$ 13,027	\$ 19,981	\$ 20,282	\$ 12,975	\$ 15,327	\$ 17,506	\$ 19,972
4. PATIENT MIX									
a. Percent of Total Revenue									
1) Medicare	47.9%	48.6%	48.1%	48.1%	47.8%	47.6%	47.5%	47.4%	47.4%
2) Medicaid	3.7%	4.2%	3.6%	3.6%	3.6%	3.7%	3.7%	3.7%	3.7%
3) Blue Cross	18.4%	17.8%	16.7%	16.7%	16.7%	16.7%	16.7%	16.7%	16.7%
4) Commercial Insurance	18.1%	16.5%	17.9%	17.9%	17.9%	17.9%	17.9%	18.0%	18.0%
5) Self-pay	1.7%	1.8%	2.1%	2.1%	2.1%	2.0%	2.0%	2.0%	2.0%
6) Other	10.2%	11.1%	11.6%	11.6%	11.9%	12.1%	12.1%	12.2%	12.2%
TOTAL	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	49.6%	50.9%	50.5%	44.0%	43.9%	43.7%	43.7%	43.6%	43.6%
2) Medicaid	6.7%	9.2%	9.4%	7.5%	7.5%	7.5%	7.5%	7.5%	7.5%
3) Blue Cross	16.8%	16.4%	15.8%	20.3%	20.2%	20.1%	20.0%	20.0%	20.0%
4) Commercial Insurance	16.8%	15.3%	16.1%	19.5%	19.5%	19.5%	19.5%	19.5%	19.5%
5) Self-pay	4.0%	1.8%	1.9%	2.6%	2.6%	2.6%	2.6%	2.6%	2.6%
6) Other	6.0%	6.5%	6.3%	6.0%	6.4%	6.6%	6.7%	6.8%	6.9%
TOTAL	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%