

Referral and Visit Lags

Table One: Referral Lags for Hospital-Owned Services
Please input referral lags for all hospital-owned services.

Type of Service	Total number of patients	The percentage of appointments scheduled within three business days of referral
All Primary Care		
All Addiction Services		
All Allergy Care		
All Cardiology		
All Dermatology		
All Ear, Nose, and Throat		
All Endocrinology		
All Gastroenterology		
All General Surgery		
All Infectious Diseases		
All Neurology		
All OB/GYN		
All Oncology / Hematology		
All Ophthalmology		
All Orthopedics		
All Pain Medicine		
All Podiatry		
All Psychiatry		
All Pulmonology		
All Radiology		
All Rheumatology		
All Sleep Medicine		
All Urology		
[CUSTOM ENTRIES]		

Referral Lags 5/1/2024 - 5/14/2024	
Clinical Unit	Avg Referral Lag (Days)
Medical Clinics	7.9
Orthopedics	2.6
Ophthalmology	1.0
ENT	2.2
General Surgery & Urology	1.4
Rehab Services	1.0
Diagnostic Imaging	3.0

Referral tracking is a manual process and the current process aligns with the internal process improvement goal of a 3 day average. While this method does not allow for the reporting of percentages beyond a 3 day lag, it aligns with the intent of this reporting and promotes the same goal.

Table Two: Referral Lags for Imaging Procedures
Please input referral lags for the top five most frequent imaging procedures.

Imaging Procedure	Total number of patients	The percentage of appointments scheduled within three business days of referral
1 [CUSTOM ENTRY]		
2 [CUSTOM ENTRY]		
3 [CUSTOM ENTRY]		
4 [CUSTOM ENTRY]		
5 [CUSTOM ENTRY]		
[MORE CUSTOM ENTRIES]		

Table Three: Visit Lags for Hospital-Owned Services
Please input visit lags for all hospital-owned services. Please remember to *include* weekends and holidays in your calculation.

Type of Service	Total number of new patients	Percentage of new patients scheduled to be seen within 14 days	Percentage of new patients scheduled to be seen within 30 days	Percentage of new patients scheduled to be seen within 90 days	Percentage of new patients scheduled to be seen within 180 days
All Cardiology	233	24%	35%	44%	69%
All Ear, Nose, and Throat	397	7%	13%	40%	88%
All Endocrinology	170	14%	21%	44%	88%
All General Surgery	106	38%	58%	74%	78%
All OB/GYN	382	27%	54%	95%	97%
All Ophthalmology	267	13%	23%	34%	58%
All Orthopedics	869	27%	49%	91%	98%
All Pulmonology	234	26%	35%	52%	72%
All Urology	122	21%	31%	69%	79%

Table Four: Visit Lags for Imaging Procedures

Please input visit lags for the top five most frequent imaging procedures. Please remember to include weekends and holidays in your calculation.

Imaging Procedures	Total number of new patients	Percentage of new patients scheduled to be seen within 14 days	Percentage of new patients scheduled to be seen within 30 days	Percentage of new patients scheduled to be seen within 90 days	Percentage of new patients scheduled to be seen within 180 days
Mammography	164	20%	22%	74%	93%
XR (Chest, Knee, Shoulder, Foot)	58	93%	98%	100%	100%

Boarding and Transfer Issues

Note: These questions were lifted from budget narratives of previous years. If you are unable to answer the questions in full, please provide GMCB with a written explanation of your limitations and answer the question to the best of your ability.

Table Five: Patient Boarding

Please estimate total number of discharges, patient days, associated expenditures and reimbursements for FY22 (Actuals), FY23 (Actuals), FY24 (Projected) and FY25 (Budget): Provision of care due to the inability to discharge patients home due to lack of services or transfer patients to post-acute or other more appropriate care settings. Examples might include hospital stays beyond what is clinically indicated due to difficulties discharging/transferring after patients are deemed safe and appropriate for discharge/transfer or stays for which patients received care that would not generally be provided in a hospital setting (i.e. admissions for social reasons)

Year	Total Number of Discharges	Total Number of Patient Days	Associated Expenditures	Associated Reimbursements	
FY2022 (Actuals)	Data Not Available	Data Not Available	Data Not Available	Data Not Available	
FY2023 (Actuals - March to September)	Data Not Available		914	795,180	100,540
FY2024 (Projected)	Data Not Available		1461	1,271,070	160,710
FY2025 (Budget)	See Narrative	See Narrative	See Narrative	See Narrative	

Table Six: Patient Boarding (LOS)

Assuming the majority of patients who stay in emergency departments for greater than 24 hours without an admitted disposition are patients boarding for a mental health evaluation, please define the LOS in patient hours for patients who have a LOS greater 24 hours without an admitted disposition and the total number of episodes this represents. Please estimate the associated expenditures and reimbursements associated with these encounters.

Year	LOS in patient hours for patients who have a LOS greater 24 hours (without an admitted disposition)	Total Number of Episodes	Associated Expenditures	Associated Reimbursements
FY2023	15,419	288	3,650,250	1,551,929

Clinical Productivity

Note: If you are unable to answer the question in full, please provide GMCB with a written explanation of your limitations and answer the question to the best of your ability.

Table Seven: Clinical Productivity

Please report average work RVUs per clinical physician FTE by department – both the level and the associated percentile of national benchmarks, or similar, for the most recent year available. Report the number of clinical and budgeted FTEs (if different) that are included in the denominator.

Department	work RVUS / Clinical Physician FTEs	Associated Percentile of National Benchmark	Benchmark Source Details	Number of Clinical Physician FTEs	Number of Budgeted Clinical Physician FTEs (if different)	Year of Data
PEDIATRIC HOSPITALISTS	638.69	<25th	Coker Group	1.00	1.00	Actual=FY23 / Budget=FY25
PATHOLOGY	4,419.67	<25th	Coker Group	1.47	2.29	Actual=FY23 / Budget=FY25
EMERGENCY PHYS	5,337.46	25th-50th	Coker Group	7.23	7.22	Actual=FY23 / Budget=FY25
CARDIOLOGY	5,020.28	<25th	Coker Group	0.85	1.67	Actual=FY23 / Budget=FY25
PULMONOLOGY	6,639.88	50th-75th	Coker Group	1.00	2.01	Actual=FY23 / Budget=FY25
UROLOGY	3,423.79	<25th	Coker Group	1.20	1.00	Actual=FY23 / Budget=FY25
ENT	9,304.13	50th-75th	Coker Group	1.00	1.00	Actual=FY23 / Budget=FY25
ENDOCRINOLOGY	3,099.25	<25th	Coker Group	0.97	0.76	Actual=FY23 / Budget=FY25
URGENT CARE	3,816.00	<25th	Coker Group	0.08	0.06	Actual=FY23 / Budget=FY25
ORTHO PHYS PRACTICE	6,212.43	<25th	Coker Group	5.00	6.02	Actual=FY23 / Budget=FY25
OB PHYS PRACTICE	13,044.08	>90th	Coker Group	1.60	2.65	Actual=FY23 / Budget=FY25
OPHTHALMOLOGY	9,508.64	50th-75th	Coker Group	1.33	1.00	Actual=FY23 / Budget=FY25
GENERAL SURGERY	6,259.51	25th-50th	Coker Group	2.00	2.01	Actual=FY23 / Budget=FY25

Notes:

Pediatric Hospitalist is an investment made to ensure access to labor & delivery services in Franklin County. Volumes (FY2025 budget of 290) do not support the ability to reach national productivity benchmarks

Cardiology & Urology have historically operated using contracted physicians. Productivity has not been satisfactory and the FY2025 budget includes employed physicians

Urgent Care has been identified as an area where productivity needs improvement. See narrative.

Orthopedics is currently staffed with three providers, one slowing down as they near retirement, one building a practice and one that is highly productive. Two additional providers budgeted in FY2025

Staff Turnover

Note: If you are unable to answer the question in full, please provide GMCB with a written explanation of your limitations and answer the question to the best of your ability.

Table Eight: Staff Turnover and Vacancies				
	Employed as of May 31, 2024	Terminated employment between June 1, 2023 and May 31, 2024		Vacancies as of May 31, 2024
FTE physicians	41.08		1	10
FTE mid-level providers	19.25		10	4
FTE nurses	118.6		33	26

Column	Description
NPR FY24 Budget	FY24 Approved Budget for Net Patient Revenue and Fixed Prospective Payments (NPR).
NPR FY24 Projected	FY24 Annual Projected NPR.
NPR FY25	FY25 Proposed Budget for NPR.
NPR YOY	FY25 Proposed Budget for NPR less FY24 Budgeted NPR.
W	Weight of line item relative to total NPR YOY.
NPR FY24 @FY25 Comm. Prices	FY25 NPR due to changes in Commercial Price; estimate FY24 @ FY25 commercial prices, holding all else constant.
NPR FY25 due to Comm. Price	Difference of FY25 NPR and FY24 Budgeted NPR that can be attributed to changes in commercial price.
NPR FY25 due to Comm. Price (FY24 Proj. to Budget)	Identify the component of "NPR FY25 due to Comm. Price" that is associated with differences between FY24 projected and FY24 actual.
NPR FY25 due to Comm. Price (FY25 Budget to FY24 Proj.)	Identify the component of "NPR FY25 due to Comm. Price" that is associated with differences between FY25 proposed budget and FY24 projected.
NPR FY24 @FY25 Utiliz.	FY25 NPR due to changes in utilization; estimate FY24 @ FY25 utilization, holding all else constant.
NPR FY25 due to Utiliz.	Difference of FY25 NPR and FY24 Budgeted NPR that can be attributed to changes in utilization.
NPR FY24 @FY25 Public Payer Prices	FY25 NPR due to changes in public payer prices; estimate FY24 @ FY25 public payer prices, holding all else constant.
NPR FY25 due to Public Payer Prices	Difference of FY25 NPR and FY24 Budgeted NPR that can be attributed to changes in public payer prices.
NPR FY24 @FY25 Payer Mix	FY25 NPR due to changes in payer mix; estimate FY24 @ FY25 payer mix, holding all else constant.
NPR FY25 due to Payer Mix	Difference of FY25 NPR and FY24 Budgeted NPR that can be attributed to changes in payer mix.
NPR FY25 due to all other	Difference of FY25 NPR and FY24 Budgeted NPR that can be attributed to any other changes not captured elsewhere.
FY25 Comm Rate NPR Impact	The estimated commercial price growth as measured by impact on NPR.
FY25 Estimated Annualized Comm Rate	Uses the month of implementation for rate changes to estimate an annualized increase.
FY25 Comm Rate (Wavg)	Weighted average commercial rate changes for FY25 by payer and core service line; i.e. the contribution of the commercial price changes for a payer and core service line on a hospital's total NPR.
FY25 NPR Growth	FY25 Budgeted NPR to FY24 Budgeted NPR.
FY25 NPR Growth(Wavg)	Weighted average growth in NPR by payer and core service line; i.e. the contribution of the volume and price increase, net of payer mix shifts, on the hospital's total NPR.

*each value is collected or calculated by payer and core service line

Commercial Rate Decomposition - NPR due to Price Changes

Hospital to Provide - Currently Filled with Example Data.

Calculated	October														FY25 Comm Rate NPR Impact	FY25 Estimated AnnualizedC	FY25 Comm Rate (Wavg)	FY25 NPR Growth	FY25 NPR Growth (Wavg)		
Month of Commercial Rate Implementation	NPR FY24 Budget	NPR FY24 Proj.	NPR FY25 Budget	NPR YOY (Budget to Budget)	W	NPR FY24 @FY25 Comm. Prices	NPR FY25 due to Comm. Price	NPR FY25 due to Comm. Price (FY24 Proj. to FY24 Budget)	NPR FY25 due to Comm. Price (FY25 Budget to FY24 Proj.)	NPR FY24 @FY25 Utiliz.	NPR FY25 due to Utiliz.	NPR FY24 @FY25 Public Payer Prices	NPR FY25 due to Public Payer Prices	NPR FY24 @FY25 Payer Mix	NPR FY25 due to Payer Mix	NPR FY25 due to all other	FY25 Comm Rate NPR Impact	FY25 Estimated AnnualizedC	FY25 Comm Rate (Wavg)	FY25 NPR Growth	FY25 NPR Growth (Wavg)
Inpatient	446,456	595,000	\$ 3,851,386	3,404,930	0.01	446,456	-	-	440,920	(5,536)	446,456	16,921,501	282,857	16,305,871	(332,773)	2,259,675	0.0%	0.0%	0.0%	762.7%	9.3%
Medicare - Traditional	16,638,644	18,807,253	\$ 18,642,084	2,009,440	0.46	16,638,644	-	-	16,432,325	(206,319)	16,921,501	6,013,652	100,523	7,858,548	1,945,419	(2,440,837)	0.0%	0.0%	0.0%	-8.1%	-1.3%
Medicare - Advantage	5,913,129	6,087,383	\$ 5,435,912	(477,217)	0.16	5,913,129	-	-	5,839,806	(73,323)	6,013,652	10,066,647	-	10,562,847	496,200	(225,791)	7.0%	7.0%	1.9%	8.4%	2.3%
Commercial	10,066,647	9,972,505	\$ 10,916,895	850,248	0.28	10,771,312	704,665	-	9,941,821	(124,826)	10,066,647	50,333	3,355,511	3,389,066	33,555	(3,005,006)	0.0%	0.0%	0.0%	-87.1%	-8.0%
Fixed Prospective Payments	3,355,511	1,992,903	\$ 434,393	(2,921,118)	0.09	3,355,511	-	-	3,405,844	50,333	3,355,511	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
PPP - Medicare	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
PPP - Medicaid	3,355,511	1,992,903	\$ 434,393	(2,921,118)	0.09	3,355,511	-	-	3,355,511	-	3,355,511	-	-	3,355,511	-	(2,921,118)	0.0%	0.0%	0.0%	-87.1%	-8.0%
Risk/Reserves	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Other (Bad Debt, Free Care, DSH)	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Overall Inpatient	36,420,387	37,455,044	\$ 39,280,670	2,860,283	1.00	37,125,052	704,665	-	36,010,383	(359,671)	36,803,767	383,380	38,527,001	2,140,169	(8,260)	1.9%	1.9%	1.9%	7.9%	7.9%	
Outpatient	323,069	578,878	\$ 6,774,737	6,455,668	0.00	323,069	-	-	375,406	52,337	323,069	273,316	-	273,316	(49,753)	6,453,084	0.0%	0.0%	0.0%	1988.2%	7.6%
Medicare - Traditional	4,250,097	9,579,869	\$ 13,445,894	9,195,797	0.05	4,250,097	-	-	4,938,613	688,516	4,322,349	72,252	3,242,824	(1,007,273)	9,442,302	0.0%	0.0%	0.0%	216.4%	10.9%	
Medicare - Advantage	4,632,789	7,881,684	\$ 7,931,972	3,299,183	0.05	4,632,789	-	-	5,383,301	750,512	4,711,546	78,757	7,203,987	(101,284)	7,203,987	0.0%	0.0%	0.0%	71.2%	3.9%	
Commercial	56,573,616	62,452,594	\$ 67,213,900	10,640,284	0.67	60,533,769	3,960,153	-	65,738,541	9,164,925	56,573,616	-	55,879,477	(694,139)	(1,790,655)	7.0%	7.0%	4.7%	18.8%	12.6%	
Fixed Prospective Payments	18,827,662	11,577,195	\$ 4,065,089	(14,762,573)	0.22	18,827,662	-	-	18,827,662	-	18,827,662	-	-	-	(14,762,573)	0.0%	0.0%	0.0%	-78.4%	-17.4%	
PPP - Medicare	8,761,128	6,075,091	\$ 1,761,911	(6,999,217)	0.10	8,761,128	-	-	8,761,128	-	8,761,128	-	-	8,761,128	-	(6,999,217)	0.0%	0.0%	0.0%	-79.9%	-8.3%
PPP - Medicaid	10,066,534	5,978,711	\$ 1,303,178	(8,763,356)	0.12	10,066,534	-	-	10,066,534	-	10,066,534	-	-	10,066,534	-	(8,763,356)	0.0%	0.0%	0.0%	-87.1%	-10.4%
Risk/Reserves	-	(476,607)	\$ 1,000,000	-	0.00	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Other (Bad Debt, Free Care, DSH)	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Overall Outpatient	84,607,233	92,070,220	\$ 99,435,592	14,828,359	1.00	88,567,386	3,960,153	-	95,263,523	10,656,290	84,758,242	151,009	85,427,266	820,033	(759,126)	4.7%	4.7%	4.7%	17.5%	17.5%	
Professional Services	255,353	1,950,208	\$ 2,054,232	1,798,879	0.02	255,353	-	-	295,546	40,193	255,353	212,709	-	212,709	(42,644)	1,801,330	0.0%	0.0%	0.0%	704.5%	11.6%
Medicare - Traditional	1,604,167	1,604,701	\$ 3,134,524	1,530,357	0.10	1,604,167	-	-	1,856,663	252,496	1,604,167	1,580,104	-	1,580,104	(24,063)	1,301,924	0.0%	0.0%	0.0%	95.4%	9.9%
Medicare - Advantage	1,523,188	1,700,925	\$ 2,544,226	1,021,038	0.10	1,523,188	-	-	1,762,936	239,750	1,523,188	1,523,950	762	786,527	0.0%	0.0%	0.0%	0.0%	67.0%	6.6%	
Commercial	9,604,695	6,549,374	\$ 9,044,955	(559,740)	0.62	9,641,790	37,095	-	11,116,474	1,511,779	9,604,695	9,076,822	(527,873)	(1,580,741)	0.4%	0.4%	0.2%	-5.8%	-3.6%		
Fixed Prospective Payments	2,464,796	1,558,059	\$ 381,515	(2,083,281)	0.16	2,464,796	-	-	2,464,796	-	2,464,796	-	-	2,464,796	-	(2,083,281)	0.0%	0.0%	0.0%	-84.5%	-13.5%
PPP - Medicare	973,458	986,488	\$ 163,478	(809,980)	0.06	973,458	-	-	973,458	-	973,458	-	-	973,458	-	(809,980)	0.0%	0.0%	0.0%	-83.2%	-5.2%
PPP - Medicaid	1,491,338	571,571	\$ 218,037	(1,273,301)	0.10	1,491,338	-	-	1,491,338	-	1,491,338	-	-	1,491,338	-	(1,273,301)	0.0%	0.0%	0.0%	-85.4%	-8.2%
Risk/Reserves	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Other (Bad Debt, Free Care, DSH)	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Overall Professional Services	15,452,199	15,363,267	\$ 17,159,452	1,707,253	1.00	15,489,294	37,095	-	17,496,416	2,044,217	15,452,199	-	14,858,381	(593,818)	219,759	0.2%	0.2%	0.2%	11.0%	11.0%	
Other Services	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Medicare - Traditional	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Medicare - Advantage	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Commercial	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Fixed Prospective Payments	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
PPP - Medicare	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
PPP - Medicaid	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Risk/Reserves	-	-	\$ -	0.00	-	-	-	-	-	-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Other (Bad Debt, Free Care, DSH)	(10,299,166)	(17,803,025)	\$ (21,150,207)	(10,851,041)	1.00	(11,115,449)	(816,283)	-	(11,769,641)	(1,470,475)	(10,299,166)	-	(12,209,562)	(1,910,396)	(6,653,887)	7.9%	7.9%	7.9%	105.4%	105.4%	
Overall Other Services	(10,299,166)	(17,803,025)	\$ (21,150,207)	(10,851,041)	1.00	(11,115,449)	(816,283)	-	(11,769,641)	(1,470,475)	(10,299,166)	-	(12,209,562)	(1,910,396)	(6,653,887)	7.9%	7.9%	7.9%	105.4%	105.4%	
TOTAL	NPR FY24 Budget	NPR FY24 Proj.	NPR FY25 Budget	NPR YOY (Budget to Budget)	W	NPR FY24 @FY25 Comm. Prices	NPR FY25 due to Comm. Price	NPR FY25 due to Comm. Price (FY24 Proj. to FY24 Budget)	NPR FY25 due to Comm. Price (FY25 Budget to FY24 Proj.)	NPR FY24 @FY25 Utiliz.	NPR FY25 due to Utiliz.	NPR FY24 @FY25 Public Payer Prices	NPR FY25 due to Public Payer Prices	NPR FY24 @FY25 Payer Mix	NPR FY25 due to Payer Mix	NPR FY25 due to all other	FY25 Comm Rate NPR Impact	FY25 Estimated AnnualizedC	FY25 Comm Rate (Wavg)	FY25 NPR Growth	FY25 NPR Growth (Wavg)

Medicaid	1,024,878	3,124,086	\$ 12,684,355	11,659,477	0.01	1,024,878	-			1,111,872	86,994	1,024,878	-	1,025,390	512	11,571,971	0.0%	0.0%	0.0%	1137.6%	9.2%
Medicare - Traditional	22,492,908	29,991,823	\$ 35,222,502	12,729,594	0.18	22,492,908	-			23,227,601	734,693	22,848,017	355,109	22,504,154	11,246	11,628,546	0.0%	0.0%	0.0%	56.6%	10.1%
Medicare - Advantage	12,069,106	15,669,992	\$ 15,912,110	3,843,004	0.10	12,069,106	-			12,986,045	916,939	12,248,387	179,281	12,075,141	6,035	2,740,750	0.0%	0.0%	0.0%	31.8%	3.0%
Commercial	76,244,958	80,974,473	\$ 87,175,750	10,330,792	0.60	81,106,823	4,861,865	1,944,746	2,917,119	86,796,836	10,551,878	76,244,958	-	77,007,408	762,450	(5,245,401)	6.4%	6.4%	3.9%	14.3%	8.7%
Fixed Prospective Payments	24,647,969	15,128,157	\$ 4,880,997	(19,766,972)	0.20	24,647,969	-			24,658,302	50,333	24,647,969	-	24,894,448	246,480	(20,063,784)	0.0%	0.0%	0.0%	-80.2%	-15.7%
FPP - Medicare	9,734,586	7,061,579	\$ 1,925,389	(7,809,197)	0.08	9,734,586	-			9,734,586	-	9,734,586	-	14,936,669	5,202,083	(13,011,280)	0.0%	0.0%	0.0%	-80.2%	-6.2%
FPP - Medicaid	14,913,383	8,543,185	\$ 1,955,608	(12,957,775)	0.12	14,913,383	-			14,913,383	-	14,913,383	-	9,957,779	(4,955,604)	(8,002,171)	0.0%	0.0%	0.0%	-86.9%	-10.3%
Risk/Reserves	-	-	\$ -	-	0.00	-	-			-	-	-	-	-	-	-	0.0%	0.0%	0.0%	0.0%	0.0%
Other (Bad Debt, Free Care, DSH)	(10,299,166)	(17,805,025)	\$ (21,150,207)	(10,851,041)	-0.08	(10,299,166)	-			(11,769,641)	(1,470,475)	(10,299,166)	-	(10,505,149)	(205,983)	(9,174,583)	0.0%	0.0%	0.0%	105.4%	-8.8%
Overall Total	126,180,653	127,085,506	\$ 134,725,507	8,544,854	1.00	131,042,518	4,861,865	1,944,746	2,917,119	137,000,681	10,870,361	126,715,042	534,389	127,001,392	820,739	(8,542,501)	3.9%	3.9%	3.9%	6.8%	6.8%

Notes

Please report IP Psych consistently with prior years, and indicate in your narrative whether it is included in "inpatient" or "other services".