Community Benefit Report (Estimated)

Hospital or Group Name	Johnsto Memorial Hospita
Time Period	FY 201
Last Updated	3/11/2013 10:10 ar
mmunity Benefits	
A. Estimated Costs of Treating Charity Care Patients*	\$8,409,93
B. Estimated Unreimbursed Costs of Treating Medicare Patients*	\$3,238,59
C. Includes an adjustment in this period's Medicare revenues for extraordinary adjustments of:	\$
D. Without this Medicare adjustment, Medicare Losses would have been (B + C):	\$3,238,59
E. Estimated Unreimbursed Costs of Treating Medicaid Patients*	\$1,337,07
F. Includes an adjustment in this period's Medicaid revenues for extraordinary adjustments ¹ of:	\$1,862,60
G. Without this Medicaid adjustment, Medicaid Losses would have been (E + F):	\$3,199,68
H. Estimated Unreimbursed Costs of Treating Patients from Other Means-Tested Government Programs*	\$
I. Includes an adjustment in this period's Other Means-Tested Government Programs revenues for extraordinary adjustments ¹ of:	\$
J. Without this adjustment, Other Means-Tested Gov. Programs Losses would have been (H + I):	\$
K. Community Health Improvement Services & Community Benefit Operations	\$18,68
L. Health Professions Education	\$
M. Subsidized Health Services ²	\$
N. Research Costs	\$
O. Cash and In-kind Contributions to Community Groups	\$16,55
P. Community Building Activities ³	\$504,19
Q. Total Community Benefits 1 with Settlements and Extraordinary Adjustments (A + B + E + H + K + L + M + N + O + P)	\$13,525,03
R. Total Community Benefits 1 without Settlements and Extraordinary Adjustments (A + D + G + J + K + L + M + N + O + P)	\$15,387,63
d Debt Costs	
S. Estimated Costs of Treating Bad Debt Patients*	\$9,632,65
tes:	
(1) Notes about prior period adjustments	
(2) Notes about Subsidized Health Services	
(3) Notes about Community Building Activities	
ditional Information:	
Grant monies received to support any community benefit activities. These amounts have not been netted from Total Community Benefits.	\$
URL with additional information about this community benefits report	not availabl
Other Notes	

Report Note

* The	costing methodology or source used to determine payer costs is:
<u>X</u>	The ANDI methodology, which uses a facility-wide ratio of cost to charges as described in 2010 NCHA Community Benefits Guidelines.
	An internal cost accounting system, adjusted for community benefit reporting.
	An internal cost accounting system, adjusted for community benefit reporting, for all items except bad debt and charity care, which use an internal cost-to-charge ratio approach that is based on the methodology specified in the 2010 NCHA Community Benefits Guidelines.
	An internal cost-to-charge ratio approach that is based on the methodology specified in the 2010 NCHA

All costing methodologies do not double-count expenses reported in other community benefit items. For example, amounts reported in Subsidized Health Services do not also appear in Medicaid losses.

If any data looks odd, please email andi@ncha.org. This page was generated on May 6, 2013, 9:14:53 AM