

BALANCE SHEET		PROVIDER CCN: 11-0034	PERIOD: FROM: 07/01/2020 TO: 06/30/2021		WORKSHEET G
Assets (omit cents)	General Fund 1	Specific Purpose Fund 2	Endowment Fund 3	Plant Fund 4	
1 Cash on hand and in banks					1
2 Temporary investments	56,922,288				2
3 Notes receivable					3
4 Accounts receivable	481,786,381				4
5 Other receivables	22,891,502				5
6 Allowances for uncollectible notes and accounts receivable	(349,620,588)				6
7 Inventory	22,570,331				7
8 Prepaid expenses	15,171,456				8
9 Other current assets	20,636,401				9
10 Due from other funds					10
11 Total current assets (sum of lines 1 through 10)	297,009,962				11
FIXED ASSETS					
12 Land	15,040,169				12
13 Land improvements	717,982				13
14 Accumulated depreciation					14
15 Buildings	43,203,902				15
16 Accumulated depreciation					16
17 Leasehold improvements	207,284,476				17
18 Accumulated depreciation					18
19 Fixed equipment					19
20 Accumulated depreciation					20
21 Automobiles and trucks	772,834				21
22 Accumulated depreciation					22
23 Major movable equipment	239,674,953				23
24 Accumulated depreciation	(380,495,440)				24
25 Minor equipment depreciable	57,656,228				25
26 Accumulated depreciation					26
27 HIT designated Assets	41,582,265				27
28 Accumulated depreciation					28
29 Minor equipment-nondepreciable					29
30 Total fixed assets (sum of lines 12 through 29)	225,437,369				30
OTHER ASSETS					
31 Investments	89,161,087				31
32 Deposits on leases					32
33 Due from owners/officers					33
34 Other assets					34
35 Total other assets (sum of lines 31 through 34)	89,161,087				35
36 Total assets (sum of lines 11, 30, and 35)	611,608,418				36

BALANCE SHEET		PROVIDER CCN: 11-0034	PERIOD: FROM: 07/01/2020 TO: 06/30/2021	WORKSHEET G (CONT.)		
Liabilities and Fund Balances (omit cents)	General Fund 1	Specific Purpose Fund 2	Endowment Fund 3	Plant Fund 4		
CURRENT LIABILITIES						
37	Accounts payable	63,196,486				37
38	Salaries, wages, and fees payable					38
39	Payroll taxes payable	(702)				39
40	Notes and loans payable (short term)	6,826,844				40
41	Deferred income	54,625,893				41
42	Accelerated payments	20,604,321				42
43	Due to other funds	(85,223,367)				43
44	Other current liabilities	9,442,875				44
45	Total current liabilities (sum of 45 lines 37 thru 44)	103,917,263				45
LONG TERM LIABILITIES						
46	Mortgage payable					46
47	Notes payable					47
48	Unsecured loans					48
49	Other long term liabilities	197,972,203				49
50	Total long term liabilities (sum of 50 lines 46 thru 49)	197,972,203				50
51	Total liabilities (sum of lines 45 and 50)	301,889,466				51
CAPITAL ACCOUNTS						
52	General fund balance	309,718,952				52
53	Specific purpose fund					53
54	Donor created - endowment fund 54 balance - restricted					54
55	Donor created - endowment fund balance - unrestricted					55
56	Governing body created - endowment fund balance					56
57	Plant fund balance - invested in plant					57
58	Plant fund balance - reserve for plant improvement, replacement, and expansion					58
59	Total fund balances (sum of lines 52 thru 58)	309,718,952				59
60	Total liabilities and fund balances (sum of 60 lines 51 and 59)	611,608,418				60

STATEMENT OF CHANGES IN FUND BALANCES

PROVIDER CCN:
11-0034

PERIOD:
FROM: 07/01/2020
TO: 06/30/2021

WORKSHEET G-1

	GENERAL FUND		SPECIFIC PURPOSE FUND	ENDOWMENT FUND		PLANT FUND			
	1	2	3	4	5	6	7		8
1 Fund balances at beginning of period		319,455,303							1
2 Net income (loss) (from Worksheet G-3, line 29)		(477,288)							2
3 Total (sum of line 1 and line 2)		318,978,015							3
4 Additions (credit adjustments) (specify) 4 5 5									4
5									5
6									6
7									7
8									8
9									9
10 Total additions (sum of lines 4 through 9)									10
11 Subtotal (line 3 plus line 10)		318,978,015							11
12 Deductions (debit adjustments) (specify)	9,259,063								12
13									13
14									14
15									15
16									16
17									17
18 Total deductions (sum of lines 12 through 17)		9,259,063							18
19 Fund balance at end of period per balance sheet (line 11 minus line 18)		309,718,952							19

PART I - PATIENT REVENUES

REVENUE CENTER	INPATIENT 1	OUTPATIENT 2	TOTAL 3	
GENERAL INPATIENT ROUTINE CARE SERVICES				
1 Hospital	81,434,231		81,434,231	1
2 Subprovider IPF				2
3 Subprovider IRF				3
4 Subprovider (Other)				4
5 Swing bed - SNF				5
6 Swing bed - NF				6
7 Skilled nursing facility				7
8 Nursing facility				8
9 Other long term care				9
10 Total general inpatient care services (sum of lines 1 through 9)	81,434,231		81,434,231	10
INTENSIVE CARE TYPE INPATIENT HOSPITAL SERVICES				
11 Intensive care unit	43,588,509		43,588,509	11
11.01 02080PEDIATRIC INTENSIVE CARE UNIT	12,764,136		12,764,136	11.01
12 Coronary care unit	21,417,379		21,417,379	12
13 Burn intensive care unit				13
14 Surgical intensive care unit	11,475,647		11,475,647	14
14.01 02180TRAUMA INTENSIVE CARE UNIT	16,156,440		16,156,440	14.01
14.02 02060NEONATAL INTENSIVE CARE UNIT	36,378,735		36,378,735	14.02
15 Other special care (specify)				15
16 Total intensive care type inpatient hospital services (sum of 16 of lines 11-15)	141,780,846		141,780,846	16
17 Total inpatient routine care services (sum of lines 10 and 16)	223,215,077		223,215,077	17
18 Ancillary services	1,277,579,173	1,834,410,073	3,111,989,246	18
19 Outpatient services		134,171,915	134,171,915	19
20 Rural Health Clinic (RHC)				20
21 Federally Qualified Health Center (FQHC)				21
22 Home health agency				22
23 Ambulance				23
24 Outpatient rehabilitation providers				24
25 ASC				25
26 Hospice				26
27 Other (specify)				27
28 Total patient revenues (sum of lines 17 through 27) (transfer column 3 to 28 Worksheet G-3, line 1)	1,500,794,250	1,968,581,988	3,469,376,238	28

PART II - OPERATING EXPENSES

REVENUE CENTER	1	2	
29 Operating expenses (per Wkst. A, column 3, line 200)		937,367,826	29
30 Add (specify)			30
31			31
32			32
33			33
34			34
35			35
36 Total additions (sum of lines 30 through 35)			36
37 Deduct (specify)			37
38			38
39			39
40			40
41			41
43 Total deductions (sum of lines 37 through 41)		937,367,826	43
43 Total operating expenses (sum of lines 29 and 36 minus line 42) (transfer to Worksheet G-3, line 4)		937,367,826	43

AU MEDICAL CENTER INC
STATEMENT OF REVENUES
AND EXPENSES

12-22

PROVIDER CCN:
11-0034

PERIOD:
FROM: 07/01/2020
TO: 06/30/2021

WORKSHEET G-3

Description		1	
1 Total patient revenues (from Worksheet G-2, Part I, column 3, line 28)		3,469,376,238	1
2 Less contractual allowances and discounts on patients' accounts		2,723,971,951	2
3 Net patient revenues (line 1 minus line 2)		745,404,287	3
4 Less total operating expenses (from Worksheet G-2, Part II, line 43)		937,367,826	4
5 Net income from service to patients (line 3 minus line 4)		(191,963,539)	5
OTHER INCOME			
6 Contributions, donations, bequests, etc			6
7 Income from investments		2,554,825	7
8 Revenues from telephone and other miscellaneous communication services			8
9 Revenue from television and radio service			9
10 Purchase discounts			10
11 Rebates and refunds of expenses			11
12 Parking lot receipts			12
13 Revenue from laundry and linen service			13
14 Revenue from meals sold to employees and guests		482	14
15 Revenue from rental of living quarters			15
16 Revenue from sale of medical and surgical supplies to other than patients			16
17 Revenue from sale of drugs to other than patients		97,749,736	17
18 Revenue from sale of medical records and abstracts			18
19 Tuition (fees, sale of textbooks, uniforms, etc.)			19
20 Revenue from gifts, flowers, coffee shops, and canteen			20
21 Rental of vending machines		74,973	21
22 Rental of hospital space		199,652	22
23 Governmental appropriations		30,602,507	23
24 GRANT REVENUE		8,966,601	24
24.01 DISPOSAL OF ASSETS/GAINS & LOSSES ON		16,069,026	24.01
24.02 DEPT SALES		3,198,279	24.02
24.03 MEDICAID DSH UPL		27,400,412	24.03
24.04 GBPW		1,376,807	24.04
24.05 MISC INCOME		93,740	24.05
24.06 COVID TESTING CONTRACT REVENUE		2,664,971	24.06
24.5 COVID-19 PHE Funding		534,240	24.5
25 Total other income (sum of lines 6-24)		191,486,251	25
26 Total (line 5 plus line 25)		(477,288)	26
27 Other expenses (specify)			27
28 Total other expenses (sum of line 27 and subscripts)			28
29 Net income (or loss) for the period (line 26 minus line 28)		(477,288)	29