	ORS HOSPITAL OF AUGUSTA				T = = = - = =		· · · · · · · · · · · · · · · · · · ·	12-22
BALAN			PROVIDER CCN: 11-0177		PERIOD:	024	WORKSHEET	G
		11-0	7177		FROM: 04/01/2			
					TO: 03/31/202	2		
					Specific	I		1
			، ا	General	Purpose	Endowment	Plant	
	Assets			Fund	Fund	Fund	Fund	
	(omit cents)			1	2	3	4	
1	Cash on hand and in banks			· · · · · · · · · · · · · · · · · · ·	_	<u> </u>	·	1
	Temporary investments							2
	Notes receivable							3
4	Accounts receivable		22	9,004,840				3
5	Other receivables			222,668				5
6	Allowances for uncollectible notes and accounts receive	able	(22	3,775,104)				6
7	Inventory		1	2,617,632				6 7
8	Prepaid expenses			2,188,095				8
9	Other current assets							9
10	Due from other funds			(499,845)				10
11	Total current assets (sum of lines 1 through 10)		1	9,785,131				11
	FIXED ASSETS		•				-	
12	Land		1	4,065,323				12
13	Land improvements			2,446,708				13
	Accumulated depreciation		((1,897,513)				14
	Buildings		4	1,068,864				15
16	Accumulated depreciation			4,046,612)				16
	Leasehold improvements			7,938,135				17
	Accumulated depreciation			6,276,209)				18
	Fixed equipment			6,202,562				19
	Accumulated depreciation		(4	0,998,517)				20
	Automobiles and trucks							21
	Accumulated depreciation							22
	Major movable equipment			9,014,804				23
	Accumulated depreciation			6,691,603)				24
	Minor equipment depreciable			0,090,675				25
	Accumulated depreciation		(1	2,782,218)		ļ		26
	HIT designated Assets					ļ		27
	Accumulated depreciation			750 540				28
	Minor equipment-nondepreciable			756,549				29
30	Total fixed assets (sum of lines 12 through 29)		11	8,890,948				30
	OTHER ASSETS		1 4	7 004 470		1	1	T 04
	Investments		4	7,884,473				31
	Deposits on leases					1	1	32 33
	Due from owners/officers Other assets			4 772 702				33
	Total other assets (sum of lines 31 through 34)			4,772,702 2,657,175				35
	Total other assets (sum of lines 31 through 34) Total assets (sum of lines 11, 30, and 35)			1,333,254				36
	Total assets (sum of lines 11, 30, and 35)		18	1,333,234		ļ	ļ	36

BALANCE SHEET		PROVIDER CCN 11-0177	l:	PERIOD: FROM: 04/01/2021 TO: 03/31/2022		WORKSHEET G (CONT.)	
				Specific			
	Liabilities and Fund		General	Purpose	Endowment	Plant	
	Balances		Fund	Fund	Fund	Fund	
	(omit cents)		1	2	3	4	
	CURRENT LIABILITIES					1	1 0-
	Accounts payable		14,955,781				37
	Salaries, wages, and fees payable		4 475 000				38
	Payroll taxes payable		1,475,323				39
	Notes and loans payable (short term)		804,082				40
	Deferred income						41
	Accelerated payments						42
	Due to other funds						43
	Other current liabilities Total current liabilities (sum of 45 lines 37 thru 44)		1,081,798 26,134,490				44
46	LONG TERM LIABILITIES Mortgage payable			<u> </u>		1	46
	Notes payable		10,535,797				47
	Unsecured loans		(515,695,440)				48
49	Other long term liabilities		3,570,879				49
50	Total long term liabilities (sum of 50 lines 46 thru 49)		(501,588,764)				50
	Total liabilities (sum of lines 45 and 50)		(475,454,274)				51
	CAPITAL ACCOUNTS						
52	General fund balance		666,787,528	l			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
	Plant fund balance - invested in plant	<u> </u>		i			57
	Plant fund balance - reserve for plant improvement, replacement, ar	nd expansion					58
59	Total fund balances (sum of lines 52 thru 58)		666,787,528				59
60	Total liabilities and fund balances (sum of 60 lines 51 and 59)		191,333,254		1	1	60

	NT OF CHANGES IN FUND BALANCES		PROVIDER CCN:		PERIOD:		WORKSHEET G-1			
					11-0177		FROM: 04/01/20 TO: 03/31/2022			
		GENER	RAL FUND	SPECIFIC PU	JRPOSE FUND	ENDOWN	MENT FUND	PLAN	NT FUND	
		1	2	3	4	5	6	7	8	
	Fund balances at beginning of period		522,150,809							1
2	Net income (loss) (from Worksheet G-3, line 29)		185,077,108							2
3	Total (sum of line 1 and line 2)		707,227,917							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
	Subtotal (line 3 plus line 10)		707,227,917							11
	FEDERAL TAX LIABILITY ENTRY	40,440,379								12
13	ROUNDING	10								13
14										14
15										15
16						·				16
17										17
18	Total deductions (sum of lines 12 through 17)		40,440,389							18
	Fund balance at end of period per balance sheet									
19	(line 11 minus line 18)		666,787,528							19

STATEMENT OF PATIENT REVENUES	PROVIDER CCN:	PERIOD:	WORKSHEET G-2,
AND OPERATING EXPENSES	11-0177	FROM: 04/01/2021	PARTS I & II
		TO: 03/31/2022	

PART I - PATIENT REVENUES

		INPATIENT	OUTPATIENT	TOTAL	
	REVENUE CENTER	1	2	3	
	GENERAL INPATIENT ROUTINE CARE SERVICES	•			
1	Hospital	139,663,343		139,663,343	1
2	Subprovider IPF				2
3	Subprovider IRF	18,701,263		18,701,263	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)	158,364,606		158,364,606	10
	INTENSIVE CARE TYPE INPATIENT HOSPITAL SERVICES				
11	Intensive care unit	32,687,324		32,687,324	11
	Coronary care unit				12
13	Burn intensive care unit	506,937,370		506,937,370	13
14	Surgical intensive care unit				14
	Other special care (specify)	10,478,977		10,478,977	15
	Total intensive care type inpatient hospital services (sum of 16 of lines 11-15)	550,103,671		550,103,671	16
	Total inpatient routine care services (sum of lines 10 and 16)	708,468,277		708,468,277	17
	Ancillary services	1,869,608,589	1,158,542,263	3,028,150,852	18
	Outpatient services	34,480,491	136,821,213	171,301,704	19
	Rural Health Clinic (RHC)				20
	Federally Qualified Health Center (FQHC)				21
22	Home health agency				22
	Ambulance				23
	Outpatient rehabilitation providers				24
	ASC				25
	Hospice				26
	PHYSICIAN FEES				27
28	Total patient revenues (sum of lines 17 through 27) (transfer column 3 to 28 Worksheet G-3, line 1)	2,612,557,357	1,295,363,476	3,907,920,833	28

PART II - OPERATING EXPENSES

	REVENUE CENTER	1	2	
29	Operating expenses (per Wkst. A, column 3, line 200)		363,823,959	29
30	ROUNDING			30
31				31
32				32
33				33
34				34
35				35
36	Total additions (sum of lines 30 through 35)			36
37	65860 RECON			37
38				38
39				39
40				40
41				41
	Total deductions (sum of lines 37 through 41)		363,823,959	43
43	Total operating expenses (sum of lines 29 and 36 minus line 42) (transfer to Worksheet G-3, line 4)		363,823,959	43

 DOCTORS HOSPITAL OF AUGUSTA
 12-22

 STATEMENT OF REVENUES
 PROVIDER CCN: PERIOD: FROM: 04/01/2021 TO: 03/31/2022
 WORKSHEET G-3

Description 1 Total patient revenues (from Worksheet G-2, Part I, column 3, line 28)	1 3,907,920,833 [
2 Less contractual allowances and discounts on patients' accounts	3,361,545,683	
3 Net patient revenues (line 1 minus line 2)	546,375,150	
4 Less total operating expenses (from Worksheet G-2, Part II, line 43)	363,823,959	
5 Net income from service to patients (line 3 minus line 4)	182,551,191	

6	Contributions, donations, bequests, etc		6
7	Income from investments		7
8	Revenues from telephone and other miscellaneous communication services		8
9	Revenue from television and radio service		9
10	Purchase discounts		10
	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	568,300	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		17
18	Revenue from sale of medical records and abstracts	1,527	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		21
	Rental of hospital space		22
23	Governmental appropriations		23
24	OTHER INCOME	1,956,086	24
24.5	COVID-19 PHE Funding		24.5
25	Total other income (sum of lines 6-24)	2,525,913	25
26	Total (line 5 plus line 25)	185,077,104	26
27	ROUNDING	(4)	27
	Total other expenses (sum of line 27 and subscripts)	(4)	28
29	Net income (or loss) for the period (line 26 minus line 28)	185,077,108	29