Hospital Fiscal Report

State Form 49520 (R2 /7-02)
(Form approved by State Board of Accounts, 2000)

I. Identification of Organization

Hospital Name: DEACONESS HOSPITAL, INC.
City of Hospital: Evansville
Year Begin: 10012007
Year End: 09302008
Medicare Provider Number: 150082

Statement One: Summary of Revenue and Expenses

1. Gross Patient Service Revenue

Inpatient Patient Service Revenue	$692335399
Outpatient Patient Service Revenue	$509152769
Total Gross Patient Service Revenue	$1201488168

2. Deductions From Revenue

Contractual Allowance	$669780925
Other Deductions	$44764554
Total Deductions	$714545479

3. Total Operating Revenue

Net Patient Service Revenue	$486942689
Other Operating Revenue	$23770409
Total Operating Revenue	$510713098

4. Operating Expenses

Salaries and Wages	$173279574	Employee Benefits	$45597917
Depreciation and Amortization	$30408623	Interest Expense	$6890311
Bad Debt	$27689386	Other Expenses	$200873104
Total Operating Expenses	$484738915		

5. Net Revenue and Expenses

Excess Revenue over Expenses	$25974184	Total Assets	$562078187
Net Non-operating Gains over Loss	$6386137	Total Liabilities	$213533472
Total Net Gains	$32360321		

Statement Two: Contractual Allowance

Revenue Source	Gross Patient Revenue	Contractual Allowance	Net Patient Service Allowance

Medicare	$561805313	$393330306	$168475007
Medicaid	$101008976	$87629446	$13379530
Other Government	$0	$0	$0
Other State	$0	$0	$0
Other Payers	$538673879	$233585727	$305088152
Total	$1201488168	$714545479	$486942689

Statement Three: Donations Statement

	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Donations	$168877	$1438891	$-1270014

Statement Four: Research Statement

	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Research	$0	$0	$0

Statement Five: Education Statement

Education of	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Medical Professionals	$3267316	$4472053	$-1204737
Hospital Patients	$0	$0	$0
Community Education	$200	$87150	$-86950

Number of Medical Professionals Trained	24464
Number of Hospital Patients Educated	0
Number of Citizens Exposed to Health Education Messages	3194

Statement Six: Charity Statement

Hospital Charity Charges	$46588670

	Payments from	Less Costs to	Unreimbursed

	Clients	Hospital	Costs to Hospital
Charity Care	$0	$18141361	
HCI Payments	$1824116		
Subtotal	$1824116	$18141361	$-16317245
Medicaid Shortfalls	$13379530	$39330893	
Subtotal	$15203646	$57472254	$-42268608
DSH Payments	$3,597,395		
Subtotal	$18801041	$57472254	$-38671213
Medicare Shortfalls	$168475007	$218755852	
Other Government Programs	$0	$0	
Total	$187276048	$276228106	$-88952058

Statement Seven: Subsidized Health Services for the Community

	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Community Programs	$158095	$843602	$-685507
Community Assessment	$0	$0	$0
Provision of Taxes	$0	$0	$0
Other Allocations	$9463641	$11694398	$-2230757