



HOSPITAL FISCAL REPORT

State Form 49520 (R2/7-02)

Indiana State Department of Health

(Form Approved by State Board of Accounts, 2002)

II. Identification of Organization

Name of Hospital		Union Hospital	
City of Hospital		Terre Haute	
Year Begin (xx/xx/xxxx)	09/01/2007	Year End (xx/xx/xxxx)	08/31/2008
Person Completing the Report		Shantha Aaron	
E-Mail Address		fassa@uhhg.org	
Medicare Provider Number		15-0023	

Statement One:	Summary of Revenue and Expenses
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1. Gross Patient Service Revenue		2. Deductions From Revenue	
Inpatient Patient Service Revenue	\$ 383,444,553	Contractual Allowance	\$ 463,715,398
Outpatient Patient Service Revenue	\$ 443,257,541	Other Deductions Charity	\$ 25,176,066
Total Gross Patient Service Revenue	\$ 826,702,094	Total Deductions	\$ 488,891,464

3. Total Operating Revenue

Net Patient Service Revenue	\$ 337,810,630
Other Operating Revenue	\$ 10,402,705
Total Operating Revenue	\$ 348,213,335

4. Operating Expenses

Salaries and Wages	\$ 97,715,431	Employee Benefits	\$ 26,647,064
Depreciation and Amortization	\$ 10,622,340	Interest Expense	\$ 2,479,389
Bad Debt	\$ 21,129,272	Other Expenses	\$ 179,830,674
Total Operating Expenses	\$ 338,424,170		

5. Net Revenue and Expenses		6. Assets and Liabilities	
Excess Revenue over Expenses	\$ 9,789,1654	Total Assets	\$ 455,529,336
Net Non-operating Gains over Losses	\$ 3,717,656	Total Liabilities	\$ 336,950,577
Total Net Gain	\$ 13,506,821		

Statement Two	Contractual Allowance
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Revenue Source	Gross Patient Revenue	Contractual Allowance	Net Patient Service Revenue
Medicare	\$ 389,716,563	\$ 249,055,291	\$ 140,661,272
Medicaid	\$ 108,319,561	\$ 98,230,765	\$ 10,088,796
Other Government	\$ --	\$	\$
Other State III	\$ 328,665,970	\$ 141,605,408	\$ 187,060,562
Other Payers	\$	\$	\$
Total	\$ 826,702,094	\$ 488,891,464	\$ 337,810,630

Statement Three	Donations Statement
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	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Donations	\$ --	\$ 161,159	\$(161,159)

Statement Four	Research Statement
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	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Research	\$ --	\$ --	\$ --

Statement Five	Education Statement
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Education of	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Medical Professionals	\$ --	\$ 1,218,098	\$ (1,218,098)
Hospital Patients	\$ --	\$ 1,946,075	\$ (1,946,075)
Community Education	\$ --	\$ 156,377	\$ (156,377)

Number of Medical Professionals Trained	100,069
Number of Hospital Patients Educated	258,451
Number of Citizens Exposed to Health Education Messages	2,363

Statement Six:	Charity Statement
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Hospital Charity Charges	\$22,684,099
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	Adjustments		
	Payments From Clients	LESS Costs to Hospital	Unreimbursed Costs to Hospital
Charity Costs by Hospital	--	\$ --	9,013,264
Charity Payments by Clients	\$ --	--	--
HCI Payments	\$ 1,921,162	--	--
Subtotal	\$ 1,921,162	\$ --	\$ 9,013,264
Medicaid Shortfalls	\$ 12,400,505	\$ 43,039,694	30,639,189
Subtotal	\$ 14,321,667	\$ 43,039,694	\$ 39,652,453
DSH Payments	\$ --	--	--
Subtotal	\$ 14,321,667	\$ 43,039,694	\$ 39,652,453
Medicare Shortfalls	\$ 110,209,422	\$ 154,849,979	44,640,557
Other Government Programs	\$ --	\$ ---	--
Total	\$ 124,531,089	\$ 197,889,673	\$ 84,293,010

Statement Seven:	Subsidized Health Services for the Community
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	Estimated Incoming Revenue	Estimated Outgoing Expenses	Net Dollar Gain or Loss
Community Programs	\$ --	\$ 2,649,269	\$ (2,649,269)
Community Assessment	\$ --	--	\$ --
Provision of Taxes	\$ --	\$ 502,057	\$ (502,057)
Other Allocations	\$ --	\$ 297,211	\$ (297,211)