

This report is required by law (42 USC 1395g; 42 CFR 413.20(b)). Failure to report can result in all interim payments made since the beginning of the cost reporting period being deemed overpayments (42 USC 1395g). FORM APPROVED OMB NO. 0938-0050 EXPIRES 03-31-2022

|                                                                                            |                       |                                             |                                                                         |
|--------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|-------------------------------------------------------------------------|
| HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX COST REPORT CERTIFICATION AND SETTLEMENT SUMMARY | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet S<br>Parts I-III<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|--------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|-------------------------------------------------------------------------|

**PART I - COST REPORT STATUS**

|                     |                                                                                                                                                          |                                                                                                                                                                              |                                                                                                                                                  |
|---------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|
| Provider use only   | 1. <input checked="" type="checkbox"/> Electronically filed cost report                                                                                  | Date: 11/24/2019                                                                                                                                                             | Time: 4:22 pm                                                                                                                                    |
|                     | 2. <input type="checkbox"/> Manually submitted cost report                                                                                               |                                                                                                                                                                              |                                                                                                                                                  |
|                     | 3. <input type="checkbox"/> If this is an amended report enter the number of times the provider resubmitted this cost report                             |                                                                                                                                                                              |                                                                                                                                                  |
|                     | 4. <input type="checkbox"/> Medicare Utilization. Enter "F" for full or "L" for low.                                                                     |                                                                                                                                                                              |                                                                                                                                                  |
| Contractor use only | 5. <input type="checkbox"/> Cost Report Status<br>(1) As Submitted<br>(2) Settled without Audit<br>(3) Settled with Audit<br>(4) Reopened<br>(5) Amended | 6. Date Received:<br>7. Contractor No.<br>8. <input type="checkbox"/> Initial Report for this Provider CCN<br>9. <input type="checkbox"/> Final Report for this Provider CCN | 10. NPR Date:<br>11. Contractor's Vendor Code: 4<br>12. <input type="checkbox"/> If line 5, column 1 is 4: Enter number of times reopened = 0-9. |

**PART II - CERTIFICATION**

MISREPRESENTATION OR FALSIFICATION OF ANY INFORMATION CONTAINED IN THIS COST REPORT MAY BE PUNISHABLE BY CRIMINAL, CIVIL AND ADMINISTRATIVE ACTION, FINE AND/OR IMPRISONMENT UNDER FEDERAL LAW. FURTHERMORE, IF SERVICES IDENTIFIED IN THIS REPORT WERE PROVIDED OR PROCURED THROUGH THE PAYMENT DIRECTLY OR INDIRECTLY OF A KICKBACK OR WERE OTHERWISE ILLEGAL, CRIMINAL, CIVIL AND ADMINISTRATIVE ACTION, FINES AND/OR IMPRISONMENT MAY RESULT.

CERTIFICATION BY CHIEF FINANCIAL OFFICER OR ADMINISTRATOR OF PROVIDER(S)

I HEREBY CERTIFY that I have read the above certification statement and that I have examined the accompanying electronically filed or manually submitted cost report and the Balance Sheet and Statement of Revenue and Expenses prepared by RUSH UNIVERSITY MEDICAL CENTER ( 14-0119 ) for the cost reporting period beginning 07/01/2018 and ending 06/30/2019 and to the best of my knowledge and belief, this report and statement are true, correct, complete and prepared from the books and records of the provider in accordance with applicable instructions, except as noted. I further certify that I am familiar with the laws and regulations regarding the provision of health care services, and that the services identified in this cost report were provided in compliance with such laws and regulations.

☐ I have read and agree with the above certification statement. I certify that I intend my electronic signature on this certification statement to be the legally binding equivalent of my original signature.

(Signed)

\_\_\_\_\_  
Officer or Administrator of Provider(s)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

| Cost Center Description |                               | Title V | Title XVIII |         | HIT  | Title XIX |        |
|-------------------------|-------------------------------|---------|-------------|---------|------|-----------|--------|
|                         |                               |         | Part A      | Part B  |      |           |        |
|                         |                               | 1.00    | 2.00        | 3.00    | 4.00 | 5.00      |        |
|                         | PART III - SETTLEMENT SUMMARY |         |             |         |      |           |        |
| 1.00                    | Hospital                      | 0       | 7,996,758   | 950,001 | 0    | 0         | 1.00   |
| 2.00                    | Subprovider - IPF             | 0       | 235,343     | 0       |      | 0         | 2.00   |
| 3.00                    | Subprovider - IRF             | 0       | 774,200     | 0       |      | 0         | 3.00   |
| 5.00                    | Swing bed - SNF               | 0       | 0           | 0       |      | 0         | 5.00   |
| 6.00                    | Swing bed - NF                | 0       |             |         |      | 0         | 6.00   |
| 200.00                  | Total                         | 0       | 9,006,301   | 950,001 | 0    | 0         | 200.00 |

The above amounts represent "due to" or "due from" the applicable program for the element of the above complex indicated.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0938-0050. The time required to complete and review the information collection is estimated 673 hours per response, including the time to review instructions, search existing resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving the form, please write to: CMS, 7500 Security Boulevard, Attn: PRA Report Clearance Officer, Mail Stop C4-26-05, Baltimore, Maryland 21244-1850. Please do not send applications, claims, payments, medical records or any documents containing sensitive information to the PRA Reports Clearance Office. Please note that any correspondence not pertaining to the information collection burden approved under the associated OMB control number listed on this form will not be reviewed, forwarded, or retained. If you have questions or concerns regarding where to submit your documents, please contact 1-800-MEDICARE.

| HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX IDENTIFICATION DATA |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                                | Provider CCN: 14-0119 |             | Period:<br>From 07/01/2018<br>To 06/30/2019 |                | Worksheet S-2<br>Part I<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |       |       |
|---------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------|--------------------------------|-----------------------|-------------|---------------------------------------------|----------------|----------------------------------------------------------------------|-------|-------|
| 1.00                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 2.00           |                                | 3.00                  |             | 4.00                                        |                |                                                                      |       |       |
| Hospital and Hospital Health Care Complex Address:            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 1.00                                                          | Street: 1653 W. CONGRESS PARKWAY                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |                                | PO Box:               |             |                                             |                | 1.00                                                                 |       |       |
| 2.00                                                          | City: CHICAGO                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                |                                | State: IL             |             | Zip Code: 60612                             |                | County: COOK                                                         |       |       |
|                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | Component Name |                                | CCN Number            | CBSA Number | Provider Type                               | Date Certified | Payment System (P, T, O, or N)                                       |       |       |
|                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                                |                       |             |                                             |                | V                                                                    | XVIII | XIX   |
|                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 1.00           |                                | 2.00                  | 3.00        | 4.00                                        | 5.00           | 6.00                                                                 | 7.00  | 8.00  |
| Hospital and Hospital-Based Component Identification:         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 3.00                                                          | Hospital                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                | RUSH UNIVERSITY MEDICAL CENTER | 140119                | 16974       | 1                                           | 07/01/1966     | N                                                                    | P     | N     |
| 4.00                                                          | Subprovider - IPF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                | RUSH UNIVERSITY MEDICAL CENTER | 14S119                | 16974       | 4                                           | 07/01/1984     | N                                                                    | P     | N     |
| 5.00                                                          | Subprovider - IRF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                | RUSH UNIVERSITY MEDICAL CENTER | 14T119                | 16974       | 5                                           | 07/01/1984     | N                                                                    | P     | N     |
| 6.00                                                          | Subprovider - (Other)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 7.00                                                          | Swing Beds - SNF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 8.00                                                          | Swing Beds - NF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 9.00                                                          | Hospital-Based SNF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 10.00                                                         | Hospital-Based NF                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 11.00                                                         | Hospital-Based OLTC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 12.00                                                         | Hospital-Based HHA                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 13.00                                                         | Separately Certified ASC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 14.00                                                         | Hospital-Based Hospice                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 15.00                                                         | Hospital-Based Health Clinic - RHC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 16.00                                                         | Hospital-Based Health Clinic - FQHC                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 17.00                                                         | Hospital-Based (CMHC) I                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 18.00                                                         | Renal Dialysis                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 19.00                                                         | Other                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                |                                |                       |             |                                             |                |                                                                      |       |       |
|                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                                |                       |             |                                             | From:          | To:                                                                  |       |       |
|                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                                |                       |             |                                             | 1.00           | 2.00                                                                 |       |       |
| 20.00                                                         | Cost Reporting Period (mm/dd/yyyy)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                |                                |                       |             |                                             | 07/01/2018     | 06/30/2019                                                           |       | 20.00 |
| 21.00                                                         | Type of Control (see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                |                                |                       |             |                                             | 2              |                                                                      |       | 21.00 |
|                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                                |                       |             |                                             | 1.00           | 2.00                                                                 | 3.00  |       |
| Inpatient PPS Information                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                |                                |                       |             |                                             |                |                                                                      |       |       |
| 22.00                                                         | Does this facility qualify and is it currently receiving payments for disproportionate share hospital adjustment, in accordance with 42 CFR §412.106? In column 1, enter "Y" for yes or "N" for no. Is this facility subject to 42 CFR Section §412.106(c)(2)(Pickle amendment hospital?) In column 2, enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                               |                |                                |                       |             | Y                                           | N              |                                                                      |       | 22.00 |
| 22.01                                                         | Did this hospital receive interim uncompensated care payments for this cost reporting period? Enter in column 1, "Y" for yes or "N" for no for the portion of the cost reporting period occurring prior to October 1. Enter in column 2, "Y" for yes or "N" for no for the portion of the cost reporting period occurring on or after October 1. (see instructions)                                                                                                                                                                                                                                   |                |                                |                       |             | Y                                           | Y              |                                                                      |       | 22.01 |
| 22.02                                                         | Is this a newly merged hospital that requires final uncompensated care payments to be determined at cost report settlement? (see instructions) Enter in column 1, "Y" for yes or "N" for no, for the portion of the cost reporting period prior to October 1. Enter in column 2, "Y" for yes or "N" for no, for the portion of the cost reporting period on or after October 1.                                                                                                                                                                                                                       |                |                                |                       |             | N                                           | N              |                                                                      |       | 22.02 |
| 22.03                                                         | Did this hospital receive a geographic reclassification from urban to rural as a result of the OMB standards for delineating statistical areas adopted by CMS in FY2015? Enter in column 1, "Y" for yes or "N" for no for the portion of the cost reporting period prior to October 1. Enter in column 2, "Y" for yes or "N" for no for the portion of the cost reporting period occurring on or after October 1. (see instructions) Does this hospital contain at least 100 but not more than 499 beds (as counted in accordance with 42 CFR 412.105)? Enter in column 3, "Y" for yes or "N" for no. |                |                                |                       |             | N                                           | N              | N                                                                    |       | 22.03 |
| 23.00                                                         | Which method is used to determine Medicaid days on lines 24 and/or 25 below? In column 1, enter 1 if date of admission, 2 if census days, or 3 if date of discharge. Is the method of identifying the days in this cost reporting period different from the method used in the prior cost reporting period? In column 2, enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                             |                |                                |                       |             | 1                                           | N              |                                                                      |       | 23.00 |

## HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX IDENTIFICATION DATA

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-2  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | In-State<br>Medicaid<br>paid days | In-State<br>Medicaid<br>eligible<br>unpaid<br>days | Out-of<br>State<br>Medicaid<br>paid days | Out-of<br>State<br>Medicaid<br>eligible<br>unpaid | Medicaid<br>HMO days | Other<br>Medicaid<br>days |       |       |
|-------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|----------------------------------------------------|------------------------------------------|---------------------------------------------------|----------------------|---------------------------|-------|-------|
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | 1.00                              | 2.00                                               | 3.00                                     | 4.00                                              | 5.00                 | 6.00                      |       |       |
| 24.00                                           | If this provider is an IPPS hospital, enter the in-state Medicaid paid days in column 1, in-state Medicaid eligible unpaid days in column 2, out-of-state Medicaid paid days in column 3, out-of-state Medicaid eligible unpaid days in column 4, Medicaid HMO paid and eligible but unpaid days in column 5, and other Medicaid days in column 6.                                                                                                                | 8,592                             | 12,622                                             | 0                                        | 88                                                | 30,535               | 618                       | 24.00 |       |
| 25.00                                           | If this provider is an IRF, enter the in-state Medicaid paid days in column 1, the in-state Medicaid eligible unpaid days in column 2, out-of-state Medicaid days in column 3, out-of-state Medicaid eligible unpaid days in column 4, Medicaid HMO paid and eligible but unpaid days in column 5.                                                                                                                                                                | 625                               | 679                                                | 0                                        | 32                                                | 1,258                |                           | 25.00 |       |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   | Urban/Rural S        | Date of Geogr             |       |       |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   | 1.00                 | 2.00                      |       |       |
| 26.00                                           | Enter your standard geographic classification (not wage) status at the beginning of the cost reporting period. Enter "1" for urban or "2" for rural.                                                                                                                                                                                                                                                                                                              |                                   |                                                    |                                          |                                                   | 1                    |                           | 26.00 |       |
| 27.00                                           | Enter your standard geographic classification (not wage) status at the end of the cost reporting period. Enter in column 1, "1" for urban or "2" for rural. If applicable, enter the effective date of the geographic reclassification in column 2.                                                                                                                                                                                                               |                                   |                                                    |                                          |                                                   | 2                    | 11/01/2017                | 27.00 |       |
| 35.00                                           | If this is a sole community hospital (SCH), enter the number of periods SCH status in effect in the cost reporting period.                                                                                                                                                                                                                                                                                                                                        |                                   |                                                    |                                          |                                                   | 0                    |                           | 35.00 |       |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   | Beginning:           | Ending:                   |       |       |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   | 1.00                 | 2.00                      |       |       |
| 36.00                                           | Enter applicable beginning and ending dates of SCH status. Subscript line 36 for number of periods in excess of one and enter subsequent dates.                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   |                      |                           | 36.00 |       |
| 37.00                                           | If this is a Medicare dependent hospital (MDH), enter the number of periods MDH status is in effect in the cost reporting period.                                                                                                                                                                                                                                                                                                                                 |                                   |                                                    |                                          |                                                   | 0                    |                           | 37.00 |       |
| 37.01                                           | Is this hospital a former MDH that is eligible for the MDH transitional payment in accordance with FY 2016 OPSS final rule? Enter "Y" for yes or "N" for no. (see instructions)                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   |                      |                           | 37.01 |       |
| 38.00                                           | If line 37 is 1, enter the beginning and ending dates of MDH status. If line 37 is greater than 1, subscript this line for the number of periods in excess of one and enter subsequent dates.                                                                                                                                                                                                                                                                     |                                   |                                                    |                                          |                                                   |                      |                           | 38.00 |       |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   | Y/N                  | Y/N                       |       |       |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   | 1.00                 | 2.00                      |       |       |
| 39.00                                           | Does this facility qualify for the inpatient hospital payment adjustment for low volume hospitals in accordance with 42 CFR §412.101(b)(2)(i), (ii), or (iii)? Enter in column 1 "Y" for yes or "N" for no. Does the facility meet the mileage requirements in accordance with 42 CFR §412.101(b)(2)(i), (ii), or (iii)? Enter in column 2 "Y" for yes or "N" for no. (see instructions)                                                                          |                                   |                                                    |                                          |                                                   | N                    | N                         | 39.00 |       |
| 40.00                                           | Is this hospital subject to the HAC program reduction adjustment? Enter "Y" for yes or "N" for no in column 1, for discharges prior to October 1. Enter "Y" for yes or "N" for no in column 2, for discharges on or after October 1. (see instructions)                                                                                                                                                                                                           |                                   |                                                    |                                          |                                                   | N                    | N                         | 40.00 |       |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   | V                    | XVIII                     | XIX   |       |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   | 1.00                 | 2.00                      | 3.00  |       |
| <b>Prospective Payment System (PPS)-Capital</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   |                      |                           |       |       |
| 45.00                                           | Does this facility qualify and receive Capital payment for disproportionate share in accordance with 42 CFR Section §412.320? (see instructions)                                                                                                                                                                                                                                                                                                                  |                                   |                                                    |                                          |                                                   | N                    | Y                         | N     | 45.00 |
| 46.00                                           | Is this facility eligible for additional payment exception for extraordinary circumstances pursuant to 42 CFR §412.348(f)? If yes, complete Wkst. L, Pt. III and Wkst. L-1, Pt. I through Pt. III.                                                                                                                                                                                                                                                                |                                   |                                                    |                                          |                                                   | N                    | N                         | N     | 46.00 |
| 47.00                                           | Is this a new hospital under 42 CFR §412.300(b) PPS capital? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                                                                     |                                   |                                                    |                                          |                                                   | N                    | N                         | N     | 47.00 |
| 48.00                                           | Is the facility electing full federal capital payment? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                                                                           |                                   |                                                    |                                          |                                                   | N                    | N                         | N     | 48.00 |
| <b>Teaching Hospitals</b>                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                   |                                                    |                                          |                                                   |                      |                           |       |       |
| 56.00                                           | Is this a hospital involved in training residents in approved GME programs? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                                                      |                                   |                                                    |                                          |                                                   | Y                    |                           |       | 56.00 |
| 57.00                                           | If line 56 is yes, is this the first cost reporting period during which residents in approved GME programs trained at this facility? Enter "Y" for yes or "N" for no in column 1. If column 1 is "Y" did residents start training in the first month of this cost reporting period? Enter "Y" for yes or "N" for no in column 2. If column 2 is "Y", complete Worksheet E-4. If column 2 is "N", complete Wkst. D, Parts III & IV and D-2, Pt. II, if applicable. |                                   |                                                    |                                          |                                                   | N                    |                           |       | 57.00 |
| 58.00                                           | If line 56 is yes, did this facility elect cost reimbursement for physicians' services as defined in CMS Pub. 15-1, chapter 21, §2148? If yes, complete Wkst. D-5.                                                                                                                                                                                                                                                                                                |                                   |                                                    |                                          |                                                   | N                    |                           |       | 58.00 |
| 59.00                                           | Are costs claimed on line 100 of Worksheet A? If yes, complete Wkst. D-2, Pt. I.                                                                                                                                                                                                                                                                                                                                                                                  |                                   |                                                    |                                          |                                                   | N                    |                           |       | 59.00 |

## HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX IDENTIFICATION DATA

Provider CCN: 14-0119

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From 07/01/2018  
To 06/30/2019Worksheet S-2  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|       |                                                                                                                                                                                                                                                                                                                                              | NAHE 413.85<br>Y/N | Worksheet A<br>Line # | Pass-Through<br>Qualification<br>Criterion Code |                                       |            |
|-------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|-----------------------|-------------------------------------------------|---------------------------------------|------------|
|       |                                                                                                                                                                                                                                                                                                                                              | 1.00               | 2.00                  | 3.00                                            |                                       |            |
| 60.00 | Are you claiming nursing and allied health education (NAHE) costs for any programs that meet the criteria under §413.85? (see instructions)                                                                                                                                                                                                  | Y                  |                       |                                                 | 60.00                                 |            |
| 60.01 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 20.00                 | 1                                               | 60.01                                 |            |
| 60.02 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.00                 | 1                                               | 60.02                                 |            |
| 60.03 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.01                 | 1                                               | 60.03                                 |            |
| 60.04 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.02                 | 1                                               | 60.04                                 |            |
| 60.05 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.03                 | 1                                               | 60.05                                 |            |
| 60.06 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.04                 | 1                                               | 60.06                                 |            |
| 60.07 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.05                 | 1                                               | 60.07                                 |            |
| 60.08 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.06                 | 1                                               | 60.08                                 |            |
| 60.09 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.07                 | 1                                               | 60.09                                 |            |
| 60.10 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.08                 | 1                                               | 60.10                                 |            |
| 60.11 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.09                 | 1                                               | 60.11                                 |            |
| 60.12 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.10                 | 1                                               | 60.12                                 |            |
| 60.13 | If line 60 is yes, complete columns 2 and 3 for each program. (see instructions)                                                                                                                                                                                                                                                             |                    | 23.11                 | 1                                               | 60.13                                 |            |
|       |                                                                                                                                                                                                                                                                                                                                              | Y/N                | IME                   | Direct GME                                      | IME                                   | Direct GME |
|       |                                                                                                                                                                                                                                                                                                                                              | 1.00               | 2.00                  | 3.00                                            | 4.00                                  | 5.00       |
| 61.00 | Did your hospital receive FTE slots under ACA section 5503? Enter "Y" for yes or "N" for no in column 1. (see instructions)                                                                                                                                                                                                                  | N                  |                       |                                                 | 0.00                                  | 0.00       |
| 61.01 | Enter the average number of unweighted primary care FTEs from the hospital's 3 most recent cost reports ending and submitted before March 23, 2010. (see instructions)                                                                                                                                                                       |                    |                       |                                                 |                                       |            |
| 61.02 | Enter the current year total unweighted primary care FTE count (excluding OB/GYN, general surgery FTEs, and primary care FTEs added under section 5503 of ACA). (see instructions)                                                                                                                                                           |                    |                       |                                                 |                                       |            |
| 61.03 | Enter the base line FTE count for primary care and/or general surgery residents, which is used for determining compliance with the 75% test. (see instructions)                                                                                                                                                                              |                    |                       |                                                 |                                       |            |
| 61.04 | Enter the number of unweighted primary care/or surgery allopathic and/or osteopathic FTEs in the current cost reporting period.(see instructions).                                                                                                                                                                                           |                    |                       |                                                 |                                       |            |
| 61.05 | Enter the difference between the baseline primary and/or general surgery FTEs and the current year's primary care and/or general surgery FTE counts (line 61.04 minus line 61.03). (see instructions)                                                                                                                                        |                    |                       |                                                 |                                       |            |
| 61.06 | Enter the amount of ACA §5503 award that is being used for cap relief and/or FTEs that are nonprimary care or general surgery. (see instructions)                                                                                                                                                                                            |                    |                       |                                                 |                                       |            |
|       |                                                                                                                                                                                                                                                                                                                                              | Program Name       | Program Code          | Unweighted IME<br>FTE Count                     | Unweighted<br>Direct GME FTE<br>Count |            |
|       |                                                                                                                                                                                                                                                                                                                                              | 1.00               | 2.00                  | 3.00                                            | 4.00                                  |            |
| 61.10 | Of the FTEs in line 61.05, specify each new program specialty, if any, and the number of FTE residents for each new program. (see instructions) Enter in column 1, the program name. Enter in column 2, the program code. Enter in column 3, the IME FTE unweighted count. Enter in column 4, the direct GME FTE unweighted count.           |                    |                       | 0.00                                            | 0.00                                  | 61.10      |
| 61.20 | Of the FTEs in line 61.05, specify each expanded program specialty, if any, and the number of FTE residents for each expanded program. (see instructions) Enter in column 1, the program name. Enter in column 2, the program code. Enter in column 3, the IME FTE unweighted count. Enter in column 4, the direct GME FTE unweighted count. |                    |                       | 0.00                                            | 0.00                                  | 61.20      |

| HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX IDENTIFICATION DATA                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet S-2<br>Part I<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |                                         |                                         |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|----------------------------------------------------------------------|-----------------------------------------|-----------------------------------------|
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       | 1.00                                        |                                                                      |                                         |                                         |
| <b>ACA Provisions Affecting the Health Resources and Services Administration (HRSA)</b>                                                                                                     |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       |                                             |                                                                      |                                         |                                         |
| 62.00                                                                                                                                                                                       | Enter the number of FTE residents that your hospital trained in this cost reporting period for which your hospital received HRSA PCRE funding (see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                                       |                       |                                             | 0.00                                                                 | 62.00                                   |                                         |
| 62.01                                                                                                                                                                                       | Enter the number of FTE residents that rotated from a Teaching Health Center (THC) into your hospital during in this cost reporting period of HRSA THC program. (see instructions)                                                                                                                                                                                                                                                                                                                                                                                                                     |                       |                                             | 0.00                                                                 | 62.01                                   |                                         |
| <b>Teaching Hospitals that Claim Residents in Nonprovider Settings</b>                                                                                                                      |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       |                                             |                                                                      |                                         |                                         |
| 63.00                                                                                                                                                                                       | Has your facility trained residents in nonprovider settings during this cost reporting period? Enter "Y" for yes or "N" for no in column 1. If yes, complete lines 64 through 67. (see instructions)                                                                                                                                                                                                                                                                                                                                                                                                   |                       |                                             | Y                                                                    | 63.00                                   |                                         |
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       | Unweighted<br>FTEs<br>Nonprovider<br>Site   | Unweighted<br>FTEs in<br>Hospital                                    | Ratio (col. 1/<br>(col. 1 + col.<br>2)) |                                         |
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       | 1.00                                        | 2.00                                                                 | 3.00                                    |                                         |
| <b>Section 5504 of the ACA Base Year FTE Residents in Nonprovider Settings--This base year is your cost reporting period that begins on or after July 1, 2009 and before June 30, 2010.</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       |                                             |                                                                      |                                         |                                         |
| 64.00                                                                                                                                                                                       | Enter in column 1, if line 63 is yes, or your facility trained residents in the base year period, the number of unweighted non-primary care resident FTEs attributable to rotations occurring in all nonprovider settings. Enter in column 2 the number of unweighted non-primary care resident FTEs that trained in your hospital. Enter in column 3 the ratio of (column 1 divided by (column 1 + column 2)). (see instructions)                                                                                                                                                                     |                       |                                             | 22.85                                                                | 303.92                                  |                                         |
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       | 0.069927                                    | 64.00                                                                |                                         |                                         |
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Program Name          | Program Code                                | Unweighted<br>FTEs<br>Nonprovider<br>Site                            | Unweighted<br>FTEs in<br>Hospital       | Ratio (col. 3/<br>(col. 3 + col.<br>4)) |
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 1.00                  | 2.00                                        | 3.00                                                                 | 4.00                                    | 5.00                                    |
| 65.00                                                                                                                                                                                       | Enter in column 1, if line 63 is yes, or your facility trained residents in the base year period, the program name associated with primary care FTEs for each primary care program in which you trained residents. Enter in column 2, the program code. Enter in column 3, the number of unweighted primary care FTE residents attributable to rotations occurring in all non-provider settings. Enter in column 4, the number of unweighted primary care resident FTEs that trained in your hospital. Enter in column 5, the ratio of (column 3 divided by (column 3 + column 4)). (see instructions) | INTERNAL MEDICINE     | 1400                                        | 13.54                                                                | 96.04                                   | 0.123563                                |
| 65.01                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | MED/PEDS              | 1450                                        | 0.62                                                                 | 14.75                                   | 0.040338                                |
| 65.02                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | OB GYNE               | 1750                                        | 2.94                                                                 | 17.92                                   | 0.140940                                |
| 65.03                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | PEDIATRICS            | 2000                                        | 0.50                                                                 | 34.18                                   | 0.014418                                |
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       | Unweighted<br>FTEs<br>Nonprovider<br>Site   | Unweighted<br>FTEs in<br>Hospital                                    | Ratio (col. 1/<br>(col. 1 + col.<br>2)) |                                         |
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       | 1.00                                        | 2.00                                                                 | 3.00                                    |                                         |
| <b>Section 5504 of the ACA Current Year FTE Residents in Nonprovider Settings--Effective for cost reporting periods beginning on or after July 1, 2010</b>                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       |                                             |                                                                      |                                         |                                         |
| 66.00                                                                                                                                                                                       | Enter in column 1 the number of unweighted non-primary care resident FTEs attributable to rotations occurring in all nonprovider settings. Enter in column 2 the number of unweighted non-primary care resident FTEs that trained in your hospital. Enter in column 3 the ratio of (column 1 divided by (column 1 + column 2)). (see instructions)                                                                                                                                                                                                                                                     |                       |                                             | 19.20                                                                | 386.32                                  |                                         |
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                       | 0.047347                                    | 66.00                                                                |                                         |                                         |
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Program Name          | Program Code                                | Unweighted<br>FTEs<br>Nonprovider<br>Site                            | Unweighted<br>FTEs in<br>Hospital       | Ratio (col. 3/<br>(col. 3 + col.<br>4)) |
|                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | 1.00                  | 2.00                                        | 3.00                                                                 | 4.00                                    | 5.00                                    |

## HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX IDENTIFICATION DATA

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-2  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|       | Program Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | Program Code      | Unweighted FTEs Nonprovider Site | Unweighted FTEs in Hospital | Ratio (col. 3/ (col. 3 + col. 4)) |          |
|-------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------|----------------------------------|-----------------------------|-----------------------------------|----------|
|       | 1.00                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | 2.00              | 3.00                             | 4.00                        | 5.00                              |          |
| 67.00 | Enter in column 1, the program name associated with each of your primary care programs in which you trained residents. Enter in column 2, the program code. Enter in column 3, the number of unweighted primary care FTE residents attributable to rotations occurring in all non-provider settings. Enter in column 4, the number of unweighted primary care resident FTEs that trained in your hospital. Enter in column 5, the ratio of (column 3 divided by (column 3 + column 4)). (see instructions) | INTERNAL MEDICINE | 1400                             | 3.95                        | 109.82                            | 0.034719 |
| 67.01 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | MED/PEDS          | 1450                             | 0.08                        | 15.12                             | 0.005263 |
| 67.02 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | OB GYNE           | 1750                             | 0.00                        | 21.49                             | 0.000000 |
| 67.03 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | PEDIATRICS        | 2000                             | 0.85                        | 31.30                             | 0.026439 |
|       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                   |                                  |                             | 1.00                              | 2.00     |
|       | <b>Inpatient Psychiatric Facility PPS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                   |                                  |                             |                                   |          |
| 70.00 | Is this facility an Inpatient Psychiatric Facility (IPF), or does it contain an IPF subprovider? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                                                                          |                   | Y                                |                             |                                   | 70.00    |
| 71.00 | If line 70 is yes: Column 1: Did the facility have an approved GME teaching program in the most recent cost report filed on or before November 15, 2004? Enter "Y" for yes or "N" for no. (see 42 CFR 412.424(d)(1)(iii)(c)) Column 2: Did this facility train residents in a new teaching program in accordance with 42 CFR 412.424 (d)(1)(iii)(D)? Enter "Y" for yes or "N" for no. Column 3: If column 2 is Y, indicate which program year began during this cost reporting period. (see instructions)  |                   | Y                                | N                           | 0                                 | 71.00    |
|       | <b>Inpatient Rehabilitation Facility PPS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                   |                                  |                             |                                   |          |
| 75.00 | Is this facility an Inpatient Rehabilitation Facility (IRF), or does it contain an IRF subprovider? Enter "Y" for yes and "N" for no.                                                                                                                                                                                                                                                                                                                                                                      |                   | Y                                |                             |                                   | 75.00    |
| 76.00 | If line 75 is yes: Column 1: Did the facility have an approved GME teaching program in the most recent cost reporting period ending on or before November 15, 2004? Enter "Y" for yes or "N" for no. Column 2: Did this facility train residents in a new teaching program in accordance with 42 CFR 412.424 (d)(1)(iii)(D)? Enter "Y" for yes or "N" for no. Column 3: If column 2 is Y, indicate which program year began during this cost reporting period. (see instructions)                          |                   | Y                                | N                           | 0                                 | 76.00    |
|       | <b>Long Term Care Hospital PPS</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |                   |                                  |                             |                                   |          |
| 80.00 | Is this a long term care hospital (LTCH)? Enter "Y" for yes and "N" for no.                                                                                                                                                                                                                                                                                                                                                                                                                                |                   |                                  | N                           |                                   | 80.00    |
| 81.00 | Is this a LTCH co-located within another hospital for part or all of the cost reporting period? Enter "Y" for yes and "N" for no.                                                                                                                                                                                                                                                                                                                                                                          |                   |                                  | N                           |                                   | 81.00    |
|       | <b>TEFRA Providers</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                   |                                  |                             |                                   |          |
| 85.00 | Is this a new hospital under 42 CFR Section §413.40(f)(1)(i) TEFRA? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                                                                                                       |                   |                                  | N                           |                                   | 85.00    |
| 86.00 | Did this facility establish a new Other subprovider (excluded unit) under 42 CFR Section §413.40(f)(1)(ii)? Enter "Y" for yes and "N" for no.                                                                                                                                                                                                                                                                                                                                                              |                   |                                  |                             |                                   | 86.00    |
| 87.00 | Is this hospital an extended neoplastic disease care hospital classified under section 1886(d)(1)(B)(vi)? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                                                                 |                   |                                  | N                           |                                   | 87.00    |
|       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                   | V                                | XIX                         |                                   |          |
|       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                   | 1.00                             | 2.00                        |                                   |          |
|       | <b>Title V and XIX Services</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                   |                                  |                             |                                   |          |
| 90.00 | Does this facility have title V and/or XIX inpatient hospital services? Enter "Y" for yes or "N" for no in the applicable column.                                                                                                                                                                                                                                                                                                                                                                          |                   | N                                | Y                           |                                   | 90.00    |
| 91.00 | Is this hospital reimbursed for title V and/or XIX through the cost report either in full or in part? Enter "Y" for yes or "N" for no in the applicable column.                                                                                                                                                                                                                                                                                                                                            |                   | N                                | N                           |                                   | 91.00    |
| 92.00 | Are title XIX NF patients occupying title XVIII SNF beds (dual certification)? (see instructions) Enter "Y" for yes or "N" for no in the applicable column.                                                                                                                                                                                                                                                                                                                                                |                   |                                  | N                           |                                   | 92.00    |
| 93.00 | Does this facility operate an ICF/IID facility for purposes of title V and XIX? Enter "Y" for yes or "N" for no in the applicable column.                                                                                                                                                                                                                                                                                                                                                                  |                   | N                                | N                           |                                   | 93.00    |
| 94.00 | Does title V or XIX reduce capital cost? Enter "Y" for yes, and "N" for no in the applicable column.                                                                                                                                                                                                                                                                                                                                                                                                       |                   | N                                | N                           |                                   | 94.00    |
| 95.00 | If line 94 is "Y", enter the reduction percentage in the applicable column.                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | 0.00                             | 0.00                        |                                   | 95.00    |
| 96.00 | Does title V or XIX reduce operating cost? Enter "Y" for yes or "N" for no in the applicable column.                                                                                                                                                                                                                                                                                                                                                                                                       |                   | N                                | N                           |                                   | 96.00    |
| 97.00 | If line 96 is "Y", enter the reduction percentage in the applicable column.                                                                                                                                                                                                                                                                                                                                                                                                                                |                   | 0.00                             | 0.00                        |                                   | 97.00    |
| 98.00 | Does title V or XIX follow Medicare (title XVIII) for the interns and residents post stepdown adjustments on Wkst. B, Pt. I, col. 25? Enter "Y" for yes or "N" for no in column 1 for title V, and in column 2 for title XIX.                                                                                                                                                                                                                                                                              |                   | N                                | N                           |                                   | 98.00    |

## HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX IDENTIFICATION DATA

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-2  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | V<br>1.00           | XIX<br>2.00          |                   |
|-------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------|----------------------|-------------------|
| 98.01                                           | Does title V or XIX follow Medicare (title XVIII) for the reporting of charges on Wkst. C, Pt. I? Enter "Y" for yes or "N" for no in column 1 for title V, and in column 2 for title XIX.                                                                                                                                                                                                                                                                       | Y                   | Y                    | 98.01             |
| 98.02                                           | Does title V or XIX follow Medicare (title XVIII) for the calculation of observation bed costs on Wkst. D-1, Pt. IV, line 89? Enter "Y" for yes or "N" for no in column 1 for title V, and in column 2 for title XIX.                                                                                                                                                                                                                                           | Y                   | Y                    | 98.02             |
| 98.03                                           | Does title V or XIX follow Medicare (title XVIII) for a critical access hospital (CAH) reimbursed 101% of inpatient services cost? Enter "Y" for yes or "N" for no in column 1 for title V, and in column 2 for title XIX.                                                                                                                                                                                                                                      | N                   | N                    | 98.03             |
| 98.04                                           | Does title V or XIX follow Medicare (title XVIII) for a CAH reimbursed 101% of outpatient services cost? Enter "Y" for yes or "N" for no in column 1 for title V, and in column 2 for title XIX.                                                                                                                                                                                                                                                                | N                   | N                    | 98.04             |
| 98.05                                           | Does title V or XIX follow Medicare (title XVIII) and add back the RCE disallowance on Wkst. C, Pt. I, col. 4? Enter "Y" for yes or "N" for no in column 1 for title V, and in column 2 for title XIX.                                                                                                                                                                                                                                                          | Y                   | Y                    | 98.05             |
| 98.06                                           | Does title V or XIX follow Medicare (title XVIII) when cost reimbursed for Wkst. D, Pts. I through IV? Enter "Y" for yes or "N" for no in column 1 for title V, and in column 2 for title XIX.                                                                                                                                                                                                                                                                  | Y                   | Y                    | 98.06             |
| <b>Rural Providers</b>                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                     |                      |                   |
| 105.00                                          | Does this hospital qualify as a CAH?                                                                                                                                                                                                                                                                                                                                                                                                                            | N                   |                      | 105.00            |
| 106.00                                          | If this facility qualifies as a CAH, has it elected the all-inclusive method of payment for outpatient services? (see instructions)                                                                                                                                                                                                                                                                                                                             |                     |                      | 106.00            |
| 107.00                                          | If this facility qualifies as a CAH, is it eligible for cost reimbursement for I&R training programs? Enter "Y" for yes or "N" for no in column 1. (see instructions) If yes, the GME elimination is not made on Wkst. B, Pt. I, col. 25 and the program is cost reimbursed. If yes complete Wkst. D-2, Pt. II.                                                                                                                                                 |                     |                      | 107.00            |
| 108.00                                          | Is this a rural hospital qualifying for an exception to the CRNA fee schedule? See 42 CFR Section §412.113(c). Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                 | N                   |                      | 108.00            |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Physical<br>1.00    | Occupational<br>2.00 | Speech<br>3.00    |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Respiratory<br>4.00 |                      |                   |
| 109.00                                          | If this hospital qualifies as a CAH or a cost provider, are therapy services provided by outside supplier? Enter "Y" for yes or "N" for no for each therapy.                                                                                                                                                                                                                                                                                                    |                     |                      | 109.00            |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1.00                |                      |                   |
| 110.00                                          | Did this hospital participate in the Rural Community Hospital Demonstration project (§410A Demonstration) for the current cost reporting period? Enter "Y" for yes or "N" for no. If yes, complete Worksheet E, Part A, lines 200 through 218, and Worksheet E-2, lines 200 through 215, as applicable.                                                                                                                                                         | N                   |                      | 110.00            |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1.00                | 2.00                 |                   |
| 111.00                                          | If this facility qualifies as a CAH, did it participate in the Frontier Community Health Integration Project (FCHIP) demonstration for this cost reporting period? Enter "Y" for yes or "N" for no in column 1. If the response to column 1 is Y, enter the integration prong of the FCHIP demo in which this CAH is participating in column 2. Enter all that apply: "A" for Ambulance services; "B" for additional beds; and/or "C" for tele-health services. | N                   |                      | 111.00            |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | 1.00                | 2.00                 | 3.00              |
| <b>Miscellaneous Cost Reporting Information</b> |                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                     |                      |                   |
| 115.00                                          | Is this an all-inclusive rate provider? Enter "Y" for yes or "N" for no in column 1. If column 1 is yes, enter the method used (A, B, or E only) in column 2. If column 2 is "E", enter in column 3 either "93" percent for short term hospital or "98" percent for long term care (includes psychiatric, rehabilitation and long term hospitals providers) based on the definition in CMS Pub.15-1, chapter 22, §2208.1.                                       | N                   |                      | 0                 |
| 116.00                                          | Is this facility classified as a referral center? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                                                                              | Y                   |                      | 116.00            |
| 117.00                                          | Is this facility legally-required to carry malpractice insurance? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                                                              | N                   |                      | 117.00            |
| 118.00                                          | Is the malpractice insurance a claims-made or occurrence policy? Enter 1 if the policy is claim-made. Enter 2 if the policy is occurrence.                                                                                                                                                                                                                                                                                                                      | 0                   |                      | 118.00            |
|                                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | Premiums<br>1.00    | Losses<br>2.00       | Insurance<br>3.00 |
| 118.01                                          | List amounts of malpractice premiums and paid losses:                                                                                                                                                                                                                                                                                                                                                                                                           | 0                   | 0                    | 0                 |

| HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX IDENTIFICATION DATA                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                      | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet S-2<br>Part I<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|----------------------------------------------------------------------|
|                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                      | 1.00                  | 2.00                                        |                                                                      |
| 118.00                                                                                                                                                                                                                      | Are malpractice premiums and paid losses reported in a cost center other than the Administrative and General? If yes, submit supporting schedule listing cost centers and amounts contained therein.                                                                                                                                                                                                 | N                     |                                             | 118.00                                                               |
| 119.00                                                                                                                                                                                                                      | DO NOT USE THIS LINE                                                                                                                                                                                                                                                                                                                                                                                 |                       |                                             | 119.00                                                               |
| 120.00                                                                                                                                                                                                                      | Is this a SCH or EACH that qualifies for the Outpatient Hold Harmless provision in ACA §3121 and applicable amendments? (see instructions) Enter in column 1, "Y" for yes or "N" for no. Is this a rural hospital with < 100 beds that qualifies for the Outpatient Hold Harmless provision in ACA §3121 and applicable amendments? (see instructions) Enter in column 2, "Y" for yes or "N" for no. | N                     | N                                           | 120.00                                                               |
| 121.00                                                                                                                                                                                                                      | Did this facility incur and report costs for high cost implantable devices charged to patients? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                     | Y                     |                                             | 121.00                                                               |
| 122.00                                                                                                                                                                                                                      | Does the cost report contain healthcare related taxes as defined in §1903(w)(3) of the Act? Enter "Y" for yes or "N" for no in column 1. If column 1 is "Y", enter in column 2 the Worksheet A line number where these taxes are included.                                                                                                                                                           | N                     |                                             | 122.00                                                               |
| <b>Transplant Center Information</b>                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                      |                       |                                             |                                                                      |
| 125.00                                                                                                                                                                                                                      | Does this facility operate a transplant center? Enter "Y" for yes and "N" for no. If yes, enter certification date(s) (mm/dd/yyyy) below.                                                                                                                                                                                                                                                            | Y                     |                                             | 125.00                                                               |
| 126.00                                                                                                                                                                                                                      | If this is a Medicare certified kidney transplant center, enter the certification date in column 1 and termination date, if applicable, in column 2.                                                                                                                                                                                                                                                 | 09/01/1977            |                                             | 126.00                                                               |
| 127.00                                                                                                                                                                                                                      | If this is a Medicare certified heart transplant center, enter the certification date in column 1 and termination date, if applicable, in column 2.                                                                                                                                                                                                                                                  | 11/08/1996            | 03/05/2015                                  | 127.00                                                               |
| 128.00                                                                                                                                                                                                                      | If this is a Medicare certified liver transplant center, enter the certification date in column 1 and termination date, if applicable, in column 2.                                                                                                                                                                                                                                                  | 04/30/1991            |                                             | 128.00                                                               |
| 129.00                                                                                                                                                                                                                      | If this is a Medicare certified lung transplant center, enter the certification date in column 1 and termination date, if applicable, in column 2.                                                                                                                                                                                                                                                   |                       |                                             | 129.00                                                               |
| 130.00                                                                                                                                                                                                                      | If this is a Medicare certified pancreas transplant center, enter the certification date in column 1 and termination date, if applicable, in column 2.                                                                                                                                                                                                                                               | 07/01/1999            |                                             | 130.00                                                               |
| 131.00                                                                                                                                                                                                                      | If this is a Medicare certified intestinal transplant center, enter the certification date in column 1 and termination date, if applicable, in column 2.                                                                                                                                                                                                                                             |                       |                                             | 131.00                                                               |
| 132.00                                                                                                                                                                                                                      | If this is a Medicare certified islet transplant center, enter the certification date in column 1 and termination date, if applicable, in column 2.                                                                                                                                                                                                                                                  |                       |                                             | 132.00                                                               |
| 133.00                                                                                                                                                                                                                      | If this is a Medicare certified other transplant center, enter the certification date in column 1 and termination date, if applicable, in column 2.                                                                                                                                                                                                                                                  |                       |                                             | 133.00                                                               |
| 134.00                                                                                                                                                                                                                      | If this is an organ procurement organization (OPO), enter the OPO number in column 1 and termination date, if applicable, in column 2.                                                                                                                                                                                                                                                               |                       |                                             | 134.00                                                               |
| <b>All Providers</b>                                                                                                                                                                                                        |                                                                                                                                                                                                                                                                                                                                                                                                      |                       |                                             |                                                                      |
| 140.00                                                                                                                                                                                                                      | Are there any related organization or home office costs as defined in CMS Pub. 15-1, chapter 10? Enter "Y" for yes or "N" for no in column 1. If yes, and home office costs are claimed, enter in column 2 the home office chain number. (see instructions)                                                                                                                                          | Y                     |                                             | 140.00                                                               |
|                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                      | 1.00                  | 2.00                                        | 3.00                                                                 |
| If this facility is part of a chain organization, enter on lines 141 through 143 the name and address of the home office and enter the home office contractor name and contractor number.                                   |                                                                                                                                                                                                                                                                                                                                                                                                      |                       |                                             |                                                                      |
| 141.00                                                                                                                                                                                                                      | Name:                                                                                                                                                                                                                                                                                                                                                                                                | Contractor's Name:    | Contractor's Number:                        | 141.00                                                               |
| 142.00                                                                                                                                                                                                                      | Street:                                                                                                                                                                                                                                                                                                                                                                                              | PO Box:               |                                             | 142.00                                                               |
| 143.00                                                                                                                                                                                                                      | City:                                                                                                                                                                                                                                                                                                                                                                                                | State:                | Zip Code:                                   | 143.00                                                               |
|                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                      | 1.00                  |                                             |                                                                      |
| 144.00                                                                                                                                                                                                                      | Are provider based physicians' costs included in Worksheet A?                                                                                                                                                                                                                                                                                                                                        | Y                     |                                             | 144.00                                                               |
|                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                      | 1.00                  | 2.00                                        |                                                                      |
| 145.00                                                                                                                                                                                                                      | If costs for renal services are claimed on Wkst. A, line 74, are the costs for inpatient services only? Enter "Y" for yes or "N" for no in column 1. If column 1 is no, does the dialysis facility include Medicare utilization for this cost reporting period? Enter "Y" for yes or "N" for no in column 2.                                                                                         |                       |                                             | 145.00                                                               |
| 146.00                                                                                                                                                                                                                      | Has the cost allocation methodology changed from the previously filed cost report? Enter "Y" for yes or "N" for no in column 1. (See CMS Pub. 15-2, chapter 40, §4020) If yes, enter the approval date (mm/dd/yyyy) in column 2.                                                                                                                                                                     | N                     |                                             | 146.00                                                               |
|                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                      | 1.00                  |                                             |                                                                      |
| 147.00                                                                                                                                                                                                                      | Was there a change in the statistical basis? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                        | N                     |                                             | 147.00                                                               |
| 148.00                                                                                                                                                                                                                      | Was there a change in the order of allocation? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                                      | N                     |                                             | 148.00                                                               |
| 149.00                                                                                                                                                                                                                      | Was there a change to the simplified cost finding method? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                                                                                                           | N                     |                                             | 149.00                                                               |
|                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                      | Part A                | Part B                                      | Title V                                                              |
|                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                      | 1.00                  | 2.00                                        | 3.00                                                                 |
|                                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                      | 4.00                  |                                             |                                                                      |
| Does this facility contain a provider that qualifies for an exemption from the application of the lower of costs or charges? Enter "Y" for yes or "N" for no for each component for Part A and Part B. (See 42 CFR §413.13) |                                                                                                                                                                                                                                                                                                                                                                                                      |                       |                                             |                                                                      |
| 155.00                                                                                                                                                                                                                      | Hospital                                                                                                                                                                                                                                                                                                                                                                                             | N                     | N                                           | N                                                                    |
| 156.00                                                                                                                                                                                                                      | Subprovider - IPF                                                                                                                                                                                                                                                                                                                                                                                    | N                     | N                                           | N                                                                    |
| 157.00                                                                                                                                                                                                                      | Subprovider - IRF                                                                                                                                                                                                                                                                                                                                                                                    | N                     | N                                           | N                                                                    |
| 158.00                                                                                                                                                                                                                      | SUBPROVIDER                                                                                                                                                                                                                                                                                                                                                                                          |                       |                                             |                                                                      |
| 159.00                                                                                                                                                                                                                      | SNF                                                                                                                                                                                                                                                                                                                                                                                                  | N                     | N                                           | N                                                                    |
| 160.00                                                                                                                                                                                                                      | HOME HEALTH AGENCY                                                                                                                                                                                                                                                                                                                                                                                   | N                     | N                                           | N                                                                    |
| 161.00                                                                                                                                                                                                                      | CMHC                                                                                                                                                                                                                                                                                                                                                                                                 |                       | N                                           | N                                                                    |

|                                                                                             |                                                                                                                                                                                                                                                                                                                  |      |        |                       |          |                                             |            |                                                                      |        |
|---------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------|--------|-----------------------|----------|---------------------------------------------|------------|----------------------------------------------------------------------|--------|
| HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX IDENTIFICATION DATA                               |                                                                                                                                                                                                                                                                                                                  |      |        | Provider CCN: 14-0119 |          | Period:<br>From 07/01/2018<br>To 06/30/2019 |            | Worksheet S-2<br>Part I<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |        |
|                                                                                             |                                                                                                                                                                                                                                                                                                                  |      |        |                       |          |                                             |            | 1.00                                                                 |        |
| Multicampus                                                                                 |                                                                                                                                                                                                                                                                                                                  |      |        |                       |          |                                             |            |                                                                      |        |
| 165.00                                                                                      | Is this hospital part of a Multicampus hospital that has one or more campuses in different CBSAs?<br>Enter "Y" for yes or "N" for no.                                                                                                                                                                            |      |        |                       |          |                                             |            | N                                                                    | 165.00 |
|                                                                                             |                                                                                                                                                                                                                                                                                                                  | Name | County | State                 | Zip Code | CBSA                                        | FTE/Campus |                                                                      |        |
|                                                                                             |                                                                                                                                                                                                                                                                                                                  | 0    | 1.00   | 2.00                  | 3.00     | 4.00                                        | 5.00       |                                                                      |        |
| 166.00                                                                                      | If line 165 is yes, for each campus enter the name in column 0, county in column 1, state in column 2, zip code in column 3, CBSA in column 4, FTE/Campus in column 5 (see instructions)                                                                                                                         |      |        |                       |          |                                             | 0.00       | 166.00                                                               |        |
|                                                                                             |                                                                                                                                                                                                                                                                                                                  |      |        |                       |          |                                             |            | 1.00                                                                 |        |
| Health Information Technology (HIT) incentive in the American Recovery and Reinvestment Act |                                                                                                                                                                                                                                                                                                                  |      |        |                       |          |                                             |            |                                                                      |        |
| 167.00                                                                                      | Is this provider a meaningful user under §1886(n)? Enter "Y" for yes or "N" for no.                                                                                                                                                                                                                              |      |        |                       |          |                                             |            | Y                                                                    | 167.00 |
| 168.00                                                                                      | If this provider is a CAH (line 105 is "Y") and is a meaningful user (line 167 is "Y"), enter the reasonable cost incurred for the HIT assets (see instructions)                                                                                                                                                 |      |        |                       |          |                                             |            |                                                                      | 168.00 |
| 168.01                                                                                      | If this provider is a CAH and is not a meaningful user, does this provider qualify for a hardship exception under §413.70(a)(6)(ii)? Enter "Y" for yes or "N" for no. (see instructions)                                                                                                                         |      |        |                       |          |                                             |            |                                                                      | 168.01 |
| 169.00                                                                                      | If this provider is a meaningful user (line 167 is "Y") and is not a CAH (line 105 is "N"), enter the transition factor. (see instructions)                                                                                                                                                                      |      |        |                       |          |                                             |            | 9.99                                                                 | 169.00 |
|                                                                                             |                                                                                                                                                                                                                                                                                                                  |      |        |                       |          | Beginning                                   | Ending     |                                                                      |        |
|                                                                                             |                                                                                                                                                                                                                                                                                                                  |      |        |                       |          | 1.00                                        | 2.00       |                                                                      |        |
| 170.00                                                                                      | Enter in columns 1 and 2 the EHR beginning date and ending date for the reporting period respectively (mm/dd/yyyy)                                                                                                                                                                                               |      |        |                       |          | 07/01/2018                                  | 06/30/2019 | 170.00                                                               |        |
|                                                                                             |                                                                                                                                                                                                                                                                                                                  |      |        |                       |          | 1.00                                        | 2.00       |                                                                      |        |
| 171.00                                                                                      | If line 167 is "Y", does this provider have any days for individuals enrolled in section 1876 Medicare cost plans reported on Wkst. S-3, Pt. I, line 2, col. 6? Enter "Y" for yes and "N" for no in column 1. If column 1 is yes, enter the number of section 1876 Medicare days in column 2. (see instructions) |      |        |                       |          | N                                           |            | 171.00                                                               |        |

| HOSPITAL AND HOSPITAL HEALTH CARE REIMBURSEMENT QUESTIONNAIRE                                                               |                                                                                                                                                                                                                                                                                                                                                                                                    | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet S-2<br>Part II<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|-----------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|-----------------------------------------------------------------------|
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                    |                       | Y/N<br>1.00                                 | Date<br>2.00                                                          |
| General Instruction: Enter Y for all YES responses. Enter N for all NO responses. Enter all dates in the mm/dd/yyyy format. |                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                                             |                                                                       |
| COMPLETED BY ALL HOSPITALS                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                                             |                                                                       |
| Provider Organization and Operation                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                                             |                                                                       |
| 1.00                                                                                                                        | Has the provider changed ownership immediately prior to the beginning of the cost reporting period? If yes, enter the date of the change in column 2. (see instructions)                                                                                                                                                                                                                           | N                     |                                             | 1.00                                                                  |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                    | Y/N<br>1.00           | Date<br>2.00                                | V/I<br>3.00                                                           |
| 2.00                                                                                                                        | Has the provider terminated participation in the Medicare Program? If yes, enter in column 2 the date of termination and in column 3, "V" for voluntary or "I" for involuntary.                                                                                                                                                                                                                    | N                     |                                             | 2.00                                                                  |
| 3.00                                                                                                                        | Is the provider involved in business transactions, including management contracts, with individuals or entities (e.g., chain home offices, drug or medical supply companies) that are related to the provider or its officers, medical staff, management personnel, or members of the board of directors through ownership, control, or family and other similar relationships? (see instructions) | Y                     |                                             | 3.00                                                                  |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                    | Y/N<br>1.00           | Type<br>2.00                                | Date<br>3.00                                                          |
| Financial Data and Reports                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                                             |                                                                       |
| 4.00                                                                                                                        | Column 1: Were the financial statements prepared by a Certified Public Accountant? Column 2: If yes, enter "A" for Audited, "C" for Compiled, or "R" for Reviewed. Submit complete copy or enter date available in column 3. (see instructions) If no, see instructions.                                                                                                                           | Y                     | A                                           | 4.00                                                                  |
| 5.00                                                                                                                        | Are the cost report total expenses and total revenues different from those on the filed financial statements? If yes, submit reconciliation.                                                                                                                                                                                                                                                       | Y                     |                                             | 5.00                                                                  |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                    |                       | Y/N<br>1.00                                 | Legal Oper.<br>2.00                                                   |
| Approved Educational Activities                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                                             |                                                                       |
| 6.00                                                                                                                        | Column 1: Are costs claimed for nursing school? Column 2: If yes, is the provider is the legal operator of the program?                                                                                                                                                                                                                                                                            | Y                     | Y                                           | 6.00                                                                  |
| 7.00                                                                                                                        | Are costs claimed for Allied Health Programs? If "Y" see instructions.                                                                                                                                                                                                                                                                                                                             | Y                     |                                             | 7.00                                                                  |
| 8.00                                                                                                                        | Were nursing school and/or allied health programs approved and/or renewed during the cost reporting period? If yes, see instructions.                                                                                                                                                                                                                                                              | N                     |                                             | 8.00                                                                  |
| 9.00                                                                                                                        | Are costs claimed for Interns and Residents in an approved graduate medical education program in the current cost report? If yes, see instructions.                                                                                                                                                                                                                                                | Y                     |                                             | 9.00                                                                  |
| 10.00                                                                                                                       | Was an approved Intern and Resident GME program initiated or renewed in the current cost reporting period? If yes, see instructions.                                                                                                                                                                                                                                                               | N                     |                                             | 10.00                                                                 |
| 11.00                                                                                                                       | Are GME cost directly assigned to cost centers other than I & R in an Approved Teaching Program on Worksheet A? If yes, see instructions.                                                                                                                                                                                                                                                          | N                     |                                             | 11.00                                                                 |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                    |                       | Y/N<br>1.00                                 |                                                                       |
| Bad Debts                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                                             |                                                                       |
| 12.00                                                                                                                       | Is the provider seeking reimbursement for bad debts? If yes, see instructions.                                                                                                                                                                                                                                                                                                                     |                       | Y                                           | 12.00                                                                 |
| 13.00                                                                                                                       | If line 12 is yes, did the provider's bad debt collection policy change during this cost reporting period? If yes, submit copy.                                                                                                                                                                                                                                                                    |                       | N                                           | 13.00                                                                 |
| 14.00                                                                                                                       | If line 12 is yes, were patient deductibles and/or co-payments waived? If yes, see instructions.                                                                                                                                                                                                                                                                                                   |                       | N                                           | 14.00                                                                 |
| Bed Complement                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                                             |                                                                       |
| 15.00                                                                                                                       | Did total beds available change from the prior cost reporting period? If yes, see instructions.                                                                                                                                                                                                                                                                                                    |                       | Y                                           | 15.00                                                                 |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                    | Part A                |                                             | Part B                                                                |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                    | Y/N<br>1.00           | Date<br>2.00                                | Y/N<br>3.00                                                           |
|                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                                             | Date<br>4.00                                                          |
| PS&R Data                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                    |                       |                                             |                                                                       |
| 16.00                                                                                                                       | Was the cost report prepared using the PS&R Report only? If either column 1 or 3 is yes, enter the paid-through date of the PS&R Report used in columns 2 and 4. (see instructions)                                                                                                                                                                                                                | N                     |                                             | 16.00                                                                 |
| 17.00                                                                                                                       | Was the cost report prepared using the PS&R Report for totals and the provider's records for allocation? If either column 1 or 3 is yes, enter the paid-through date in columns 2 and 4. (see instructions)                                                                                                                                                                                        | N                     |                                             | 17.00                                                                 |
| 18.00                                                                                                                       | If line 16 or 17 is yes, were adjustments made to PS&R Report data for additional claims that have been billed but are not included on the PS&R Report used to file this cost report? If yes, see instructions.                                                                                                                                                                                    | N                     |                                             | 18.00                                                                 |
| 19.00                                                                                                                       | If line 16 or 17 is yes, were adjustments made to PS&R Report data for corrections of other PS&R Report information? If yes, see instructions.                                                                                                                                                                                                                                                     | N                     |                                             | 19.00                                                                 |

## HOSPITAL AND HOSPITAL HEALTH CARE REIMBURSEMENT QUESTIONNAIRE

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-2  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                                                                    |                                                                                                                                                                            | Description                    | Y/N                       | Y/N  |       |
|------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|---------------------------|------|-------|
|                                                                                    |                                                                                                                                                                            | 0                              | 1.00                      | 3.00 |       |
| 20.00                                                                              | If line 16 or 17 is yes, were adjustments made to PS&R Report data for Other? Describe the other adjustments:                                                              |                                | N                         | N    | 20.00 |
|                                                                                    |                                                                                                                                                                            | Y/N                            | Date                      | Y/N  | Date  |
|                                                                                    |                                                                                                                                                                            | 1.00                           | 2.00                      | 3.00 | 4.00  |
| 21.00                                                                              | Was the cost report prepared only using the provider's records? If yes, see instructions.                                                                                  | Y                              |                           | Y    | 21.00 |
|                                                                                    |                                                                                                                                                                            |                                |                           | 1.00 |       |
| COMPLETED BY COST REIMBURSED AND TEFRA HOSPITALS ONLY (EXCEPT CHILDRENS HOSPITALS) |                                                                                                                                                                            |                                |                           |      |       |
| Capital Related Cost                                                               |                                                                                                                                                                            |                                |                           |      |       |
| 22.00                                                                              | Have assets been relifed for Medicare purposes? If yes, see instructions                                                                                                   |                                | N                         |      | 22.00 |
| 23.00                                                                              | Have changes occurred in the Medicare depreciation expense due to appraisals made during the cost reporting period? If yes, see instructions.                              |                                | N                         |      | 23.00 |
| 24.00                                                                              | Were new leases and/or amendments to existing leases entered into during this cost reporting period? If yes, see instructions                                              |                                | N                         |      | 24.00 |
| 25.00                                                                              | Have there been new capitalized leases entered into during the cost reporting period? If yes, see instructions.                                                            |                                | N                         |      | 25.00 |
| 26.00                                                                              | Were assets subject to Sec.2314 of DEFRA acquired during the cost reporting period? If yes, see instructions.                                                              |                                | N                         |      | 26.00 |
| 27.00                                                                              | Has the provider's capitalization policy changed during the cost reporting period? If yes, submit copy.                                                                    |                                | N                         |      | 27.00 |
| Interest Expense                                                                   |                                                                                                                                                                            |                                |                           |      |       |
| 28.00                                                                              | Were new loans, mortgage agreements or letters of credit entered into during the cost reporting period? If yes, see instructions.                                          |                                | N                         |      | 28.00 |
| 29.00                                                                              | Did the provider have a funded depreciation account and/or bond funds (Debt Service Reserve Fund) treated as a funded depreciation account? If yes, see instructions       |                                | N                         |      | 29.00 |
| 30.00                                                                              | Has existing debt been replaced prior to its scheduled maturity with new debt? If yes, see instructions.                                                                   |                                | N                         |      | 30.00 |
| 31.00                                                                              | Has debt been recalled before scheduled maturity without issuance of new debt? If yes, see instructions.                                                                   |                                | N                         |      | 31.00 |
| Purchased Services                                                                 |                                                                                                                                                                            |                                |                           |      |       |
| 32.00                                                                              | Have changes or new agreements occurred in patient care services furnished through contractual arrangements with suppliers of services? If yes, see instructions.          |                                | N                         |      | 32.00 |
| 33.00                                                                              | If line 32 is yes, were the requirements of Sec. 2135.2 applied pertaining to competitive bidding? If no, see instructions.                                                |                                | N                         |      | 33.00 |
| Provider-Based Physicians                                                          |                                                                                                                                                                            |                                |                           |      |       |
| 34.00                                                                              | Are services furnished at the provider facility under an arrangement with provider-based physicians? If yes, see instructions.                                             |                                | Y                         |      | 34.00 |
| 35.00                                                                              | If line 34 is yes, were there new agreements or amended existing agreements with the provider-based physicians during the cost reporting period? If yes, see instructions. |                                | Y                         |      | 35.00 |
|                                                                                    |                                                                                                                                                                            | Y/N                            | Date                      |      |       |
|                                                                                    |                                                                                                                                                                            | 1.00                           | 2.00                      |      |       |
| Home Office Costs                                                                  |                                                                                                                                                                            |                                |                           |      |       |
| 36.00                                                                              | Were home office costs claimed on the cost report?                                                                                                                         |                                | N                         |      | 36.00 |
| 37.00                                                                              | If line 36 is yes, has a home office cost statement been prepared by the home office? If yes, see instructions.                                                            |                                | N                         |      | 37.00 |
| 38.00                                                                              | If line 36 is yes, was the fiscal year end of the home office different from that of the provider? If yes, enter in column 2 the fiscal year end of the home office.       |                                | N                         |      | 38.00 |
| 39.00                                                                              | If line 36 is yes, did the provider render services to other chain components? If yes, see instructions.                                                                   |                                | N                         |      | 39.00 |
| 40.00                                                                              | If line 36 is yes, did the provider render services to the home office? If yes, see instructions.                                                                          |                                | N                         |      | 40.00 |
|                                                                                    |                                                                                                                                                                            | 1.00                           | 2.00                      |      |       |
| Cost Report Preparer Contact Information                                           |                                                                                                                                                                            |                                |                           |      |       |
| 41.00                                                                              | Enter the first name, last name and the title/position held by the cost report preparer in columns 1, 2, and 3, respectively.                                              | BOBBY                          | WILLIAMS                  |      | 41.00 |
| 42.00                                                                              | Enter the employer/company name of the cost report preparer.                                                                                                               | RUSH UNIVERSITY MEDICAL CENTER |                           |      | 42.00 |
| 43.00                                                                              | Enter the telephone number and email address of the cost report preparer in columns 1 and 2, respectively.                                                                 | 312-942-8955                   | BOBBY_G.WILLIAMS@RUSH.EDU |      | 43.00 |

|                                                               |                                                                                                                               |                       |                                             |                                                                       |
|---------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|-----------------------------------------------------------------------|
| HOSPITAL AND HOSPITAL HEALTH CARE REIMBURSEMENT QUESTIONNAIRE |                                                                                                                               | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet S-2<br>Part II<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|                                                               |                                                                                                                               | 3.00                  |                                             |                                                                       |
| <b>Cost Report Preparer Contact Information</b>               |                                                                                                                               |                       |                                             |                                                                       |
| 41.00                                                         | Enter the first name, last name and the title/position held by the cost report preparer in columns 1, 2, and 3, respectively. | DIRECTOR OF FINANCE   |                                             | 41.00                                                                 |
| 42.00                                                         | Enter the employer/company name of the cost report preparer.                                                                  |                       |                                             | 42.00                                                                 |
| 43.00                                                         | Enter the telephone number and email address of the cost report preparer in columns 1 and 2, respectively.                    |                       |                                             | 43.00                                                                 |

## HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX STATISTICAL DATA

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-3  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Component                                                                                                                                                                        | Worksheet A<br>Line Number | No. of Beds | Bed Days<br>Available | CAH Hours | I/P Days / O/P<br>Visits / Trips |       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------|-------------|-----------------------|-----------|----------------------------------|-------|
|                                                                                                                                                                                  |                            |             |                       |           | Title V                          |       |
|                                                                                                                                                                                  | 1.00                       | 2.00        | 3.00                  | 4.00      | 5.00                             |       |
| 1.00 Hospital Adults & Peds. (columns 5, 6, 7 and 8 exclude Swing Bed, Observation Bed and Hospice days)(see instructions for col. 2 for the portion of LDP room available beds) | 30.00                      | 387         | 139,865               | 0.00      | 0                                | 1.00  |
| 2.00 HMO and other (see instructions)                                                                                                                                            |                            |             |                       |           |                                  | 2.00  |
| 3.00 HMO IPF Subprovider                                                                                                                                                         |                            |             |                       |           |                                  | 3.00  |
| 4.00 HMO IRF Subprovider                                                                                                                                                         |                            |             |                       |           |                                  | 4.00  |
| 5.00 Hospital Adults & Peds. Swing Bed SNF                                                                                                                                       |                            |             |                       |           | 0                                | 5.00  |
| 6.00 Hospital Adults & Peds. Swing Bed NF                                                                                                                                        |                            |             |                       |           | 0                                | 6.00  |
| 7.00 Total Adults and Peds. (exclude observation beds) (see instructions)                                                                                                        |                            | 387         | 139,865               | 0.00      | 0                                | 7.00  |
| 8.00 INTENSIVE CARE UNIT                                                                                                                                                         |                            |             |                       |           |                                  | 8.00  |
| 9.00 CORONARY CARE UNIT                                                                                                                                                          |                            |             |                       |           |                                  | 9.00  |
| 10.00 BURN INTENSIVE CARE UNIT                                                                                                                                                   |                            |             |                       |           |                                  | 10.00 |
| 11.00 SURGICAL INTENSIVE CARE UNIT                                                                                                                                               | 34.00                      | 56          | 20,427                | 0.00      | 0                                | 11.00 |
| 12.00 MEDICAL INTENSIVE CARE UNIT                                                                                                                                                | 35.00                      | 55          | 20,039                | 0.00      | 0                                | 12.00 |
| 12.01 PEDIATRIC INTENSIVE CARE UNIT                                                                                                                                              | 35.01                      | 18          | 6,563                 | 0.00      | 0                                | 12.01 |
| 12.02 PREMATURE INTENSIVE CARE UNIT                                                                                                                                              | 35.02                      | 60          | 21,900                | 0.00      | 0                                | 12.02 |
| 13.00 NURSERY                                                                                                                                                                    | 43.00                      |             |                       |           | 0                                | 13.00 |
| 14.00 Total (see instructions)                                                                                                                                                   |                            | 576         | 208,794               | 0.00      | 0                                | 14.00 |
| 15.00 CAH visits                                                                                                                                                                 |                            |             |                       |           | 0                                | 15.00 |
| 16.00 SUBPROVIDER - IPF                                                                                                                                                          | 40.00                      | 67          | 13,984                |           | 0                                | 16.00 |
| 17.00 SUBPROVIDER - IRF                                                                                                                                                          | 41.00                      | 54          | 19,710                |           | 0                                | 17.00 |
| 18.00 SUBPROVIDER                                                                                                                                                                |                            |             |                       |           |                                  | 18.00 |
| 19.00 SKILLED NURSING FACILITY                                                                                                                                                   |                            |             |                       |           |                                  | 19.00 |
| 20.00 NURSING FACILITY                                                                                                                                                           |                            |             |                       |           |                                  | 20.00 |
| 21.00 OTHER LONG TERM CARE                                                                                                                                                       |                            |             |                       |           |                                  | 21.00 |
| 22.00 HOME HEALTH AGENCY                                                                                                                                                         |                            |             |                       |           |                                  | 22.00 |
| 23.00 AMBULATORY SURGICAL CENTER (D.P.)                                                                                                                                          |                            |             |                       |           |                                  | 23.00 |
| 24.00 HOSPICE                                                                                                                                                                    |                            |             |                       |           |                                  | 24.00 |
| 24.10 HOSPICE (non-distinct part)                                                                                                                                                | 30.00                      |             |                       |           |                                  | 24.10 |
| 25.00 CMHC - CMHC                                                                                                                                                                |                            |             |                       |           |                                  | 25.00 |
| 26.00 RURAL HEALTH CLINIC                                                                                                                                                        |                            |             |                       |           |                                  | 26.00 |
| 26.25 FEDERALLY QUALIFIED HEALTH CENTER                                                                                                                                          | 89.00                      |             |                       |           | 0                                | 26.25 |
| 27.00 Total (sum of lines 14-26)                                                                                                                                                 |                            | 697         |                       |           | 0                                | 27.00 |
| 28.00 Observation Bed Days                                                                                                                                                       |                            |             |                       |           |                                  | 28.00 |
| 29.00 Ambulance Trips                                                                                                                                                            |                            |             |                       |           |                                  | 29.00 |
| 30.00 Employee discount days (see instruction)                                                                                                                                   |                            |             |                       |           |                                  | 30.00 |
| 31.00 Employee discount days - IRF                                                                                                                                               |                            |             |                       |           |                                  | 31.00 |
| 32.00 Labor & delivery days (see instructions)                                                                                                                                   |                            | 10          | 3,367                 |           |                                  | 32.00 |
| 32.01 Total ancillary labor & delivery room outpatient days (see instructions)                                                                                                   |                            |             |                       |           |                                  | 32.01 |
| 33.00 LTCH non-covered days                                                                                                                                                      |                            |             |                       |           |                                  | 33.00 |
| 33.01 LTCH site neutral days and discharges                                                                                                                                      |                            |             |                       |           |                                  | 33.01 |

## HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX STATISTICAL DATA

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-3  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Component |                                                                                                                                                                             | I/P Days / O/P Visits / Trips |           |                    | Full Time Equivalents     |                      |       |
|-----------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------|-----------|--------------------|---------------------------|----------------------|-------|
|           |                                                                                                                                                                             | Title XVIII                   | Title XIX | Total All Patients | Total Interns & Residents | Employees On Payroll |       |
|           |                                                                                                                                                                             | 6.00                          | 7.00      | 8.00               | 9.00                      | 10.00                |       |
| 1.00      | Hospital Adults & Peds. (columns 5, 6, 7 and 8 exclude Swing Bed, Observation Bed and Hospice days)(see instructions for col. 2 for the portion of LDP room available beds) | 36,361                        | 6,900     | 106,070            |                           |                      | 1.00  |
| 2.00      | HMO and other (see instructions)                                                                                                                                            | 10,933                        | 30,538    |                    |                           |                      | 2.00  |
| 3.00      | HMO IPF Subprovider                                                                                                                                                         | 0                             | 0         |                    |                           |                      | 3.00  |
| 4.00      | HMO IRF Subprovider                                                                                                                                                         | 0                             | 1,258     |                    |                           |                      | 4.00  |
| 5.00      | Hospital Adults & Peds. Swing Bed SNF                                                                                                                                       | 0                             | 0         | 0                  |                           |                      | 5.00  |
| 6.00      | Hospital Adults & Peds. Swing Bed NF                                                                                                                                        |                               | 0         | 0                  |                           |                      | 6.00  |
| 7.00      | Total Adults and Peds. (exclude observation beds) (see instructions)                                                                                                        | 36,361                        | 6,900     | 106,070            |                           |                      | 7.00  |
| 8.00      | INTENSIVE CARE UNIT                                                                                                                                                         |                               |           |                    |                           |                      | 8.00  |
| 9.00      | CORONARY CARE UNIT                                                                                                                                                          |                               |           |                    |                           |                      | 9.00  |
| 10.00     | BURN INTENSIVE CARE UNIT                                                                                                                                                    |                               |           |                    |                           |                      | 10.00 |
| 11.00     | SURGICAL INTENSIVE CARE UNIT                                                                                                                                                | 5,315                         | 1,670     | 16,585             |                           |                      | 11.00 |
| 12.00     | MEDICAL INTENSIVE CARE UNIT                                                                                                                                                 | 7,465                         | 1,054     | 17,456             |                           |                      | 12.00 |
| 12.01     | PEDIATRIC INTENSIVE CARE UNIT                                                                                                                                               | 4                             | 2,226     | 4,555              |                           |                      | 12.01 |
| 12.02     | PREMATURE INTENSIVE CARE UNIT                                                                                                                                               | 0                             | 8,366     | 15,751             |                           |                      | 12.02 |
| 13.00     | NURSERY                                                                                                                                                                     |                               | 1,807     | 3,708              |                           |                      | 13.00 |
| 14.00     | Total (see instructions)                                                                                                                                                    | 49,145                        | 22,023    | 164,125            | 656.92                    | 9,077.39             | 14.00 |
| 15.00     | CAH visits                                                                                                                                                                  | 0                             | 0         | 0                  |                           |                      | 15.00 |
| 16.00     | SUBPROVIDER - IPF                                                                                                                                                           | 1,714                         | 635       | 7,008              | 4.81                      | 61.65                | 16.00 |
| 17.00     | SUBPROVIDER - IRF                                                                                                                                                           | 3,805                         | 1,336     | 9,226              | 3.71                      | 53.50                | 17.00 |
| 18.00     | SUBPROVIDER                                                                                                                                                                 |                               |           |                    |                           |                      | 18.00 |
| 19.00     | SKILLED NURSING FACILITY                                                                                                                                                    |                               |           |                    |                           |                      | 19.00 |
| 20.00     | NURSING FACILITY                                                                                                                                                            |                               |           |                    |                           |                      | 20.00 |
| 21.00     | OTHER LONG TERM CARE                                                                                                                                                        |                               |           |                    |                           |                      | 21.00 |
| 22.00     | HOME HEALTH AGENCY                                                                                                                                                          |                               |           |                    |                           |                      | 22.00 |
| 23.00     | AMBULATORY SURGICAL CENTER (D.P.)                                                                                                                                           |                               |           |                    |                           |                      | 23.00 |
| 24.00     | HOSPICE                                                                                                                                                                     |                               |           |                    |                           |                      | 24.00 |
| 24.10     | HOSPICE (non-distinct part)                                                                                                                                                 |                               |           | 0                  |                           |                      | 24.10 |
| 25.00     | CMHC - CMHC                                                                                                                                                                 |                               |           |                    |                           |                      | 25.00 |
| 26.00     | RURAL HEALTH CLINIC                                                                                                                                                         |                               |           |                    |                           |                      | 26.00 |
| 26.25     | FEDERALLY QUALIFIED HEALTH CENTER                                                                                                                                           | 0                             | 0         | 0                  | 0.00                      | 0.00                 | 26.25 |
| 27.00     | Total (sum of lines 14-26)                                                                                                                                                  |                               |           |                    | 665.44                    | 9,192.54             | 27.00 |
| 28.00     | Observation Bed Days                                                                                                                                                        |                               | 0         | 5,864              |                           |                      | 28.00 |
| 29.00     | Ambulance Trips                                                                                                                                                             | 0                             |           |                    |                           |                      | 29.00 |
| 30.00     | Employee discount days (see instruction)                                                                                                                                    |                               |           | 0                  |                           |                      | 30.00 |
| 31.00     | Employee discount days - IRF                                                                                                                                                |                               |           | 0                  |                           |                      | 31.00 |
| 32.00     | Labor & delivery days (see instructions)                                                                                                                                    | 0                             | 618       | 2,200              |                           |                      | 32.00 |
| 32.01     | Total ancillary labor & delivery room outpatient days (see instructions)                                                                                                    |                               |           | 0                  |                           |                      | 32.01 |
| 33.00     | LTCH non-covered days                                                                                                                                                       | 0                             |           |                    |                           |                      | 33.00 |
| 33.01     | LTCH site neutral days and discharges                                                                                                                                       | 0                             |           |                    |                           |                      | 33.01 |

## HOSPITAL AND HOSPITAL HEALTH CARE COMPLEX STATISTICAL DATA

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-3  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Component                                                                                                                                                                        | Full Time<br>Equivalents | Discharges |             |           | Total All<br>Patients |       |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|------------|-------------|-----------|-----------------------|-------|
|                                                                                                                                                                                  | Nonpaid<br>Workers       | Title V    | Title XVIII | Title XIX |                       |       |
|                                                                                                                                                                                  | 11.00                    | 12.00      | 13.00       | 14.00     | 15.00                 |       |
| 1.00 Hospital Adults & Peds. (columns 5, 6, 7 and 8 exclude Swing Bed, Observation Bed and Hospice days)(see instructions for col. 2 for the portion of LDP room available beds) |                          | 0          | 9,671       | 1,713     | 31,941                | 1.00  |
| 2.00 HMO and other (see instructions)                                                                                                                                            |                          |            | 0           | 0         |                       | 2.00  |
| 3.00 HMO IPF Subprovider                                                                                                                                                         |                          |            |             | 0         |                       | 3.00  |
| 4.00 HMO IRF Subprovider                                                                                                                                                         |                          |            |             | 0         |                       | 4.00  |
| 5.00 Hospital Adults & Peds. Swing Bed SNF                                                                                                                                       |                          |            |             |           |                       | 5.00  |
| 6.00 Hospital Adults & Peds. Swing Bed NF                                                                                                                                        |                          |            |             |           |                       | 6.00  |
| 7.00 Total Adults and Peds. (exclude observation beds) (see instructions)                                                                                                        |                          |            |             |           |                       | 7.00  |
| 8.00 INTENSIVE CARE UNIT                                                                                                                                                         |                          |            |             |           |                       | 8.00  |
| 9.00 CORONARY CARE UNIT                                                                                                                                                          |                          |            |             |           |                       | 9.00  |
| 10.00 BURN INTENSIVE CARE UNIT                                                                                                                                                   |                          |            |             |           |                       | 10.00 |
| 11.00 SURGICAL INTENSIVE CARE UNIT                                                                                                                                               |                          |            |             |           |                       | 11.00 |
| 12.00 MEDICAL INTENSIVE CARE UNIT                                                                                                                                                |                          |            |             |           |                       | 12.00 |
| 12.01 PEDIATRIC INTENSIVE CARE UNIT                                                                                                                                              |                          |            |             |           |                       | 12.01 |
| 12.02 PREMATURE INTENSIVE CARE UNIT                                                                                                                                              |                          |            |             |           |                       | 12.02 |
| 13.00 NURSERY                                                                                                                                                                    |                          |            |             |           |                       | 13.00 |
| 14.00 Total (see instructions)                                                                                                                                                   | 0.00                     | 0          | 9,671       | 1,713     | 31,941                | 14.00 |
| 15.00 CAH visits                                                                                                                                                                 |                          |            |             |           |                       | 15.00 |
| 16.00 SUBPROVIDER - IPF                                                                                                                                                          | 0.00                     | 0          | 158         | 186       | 990                   | 16.00 |
| 17.00 SUBPROVIDER - IRF                                                                                                                                                          | 0.00                     | 0          | 311         | 48        | 745                   | 17.00 |
| 18.00 SUBPROVIDER                                                                                                                                                                |                          |            |             |           |                       | 18.00 |
| 19.00 SKILLED NURSING FACILITY                                                                                                                                                   |                          |            |             |           |                       | 19.00 |
| 20.00 NURSING FACILITY                                                                                                                                                           |                          |            |             |           |                       | 20.00 |
| 21.00 OTHER LONG TERM CARE                                                                                                                                                       |                          |            |             |           |                       | 21.00 |
| 22.00 HOME HEALTH AGENCY                                                                                                                                                         |                          |            |             |           |                       | 22.00 |
| 23.00 AMBULATORY SURGICAL CENTER (D.P.)                                                                                                                                          |                          |            |             |           |                       | 23.00 |
| 24.00 HOSPICE                                                                                                                                                                    |                          |            |             |           |                       | 24.00 |
| 24.10 HOSPICE (non-distinct part)                                                                                                                                                |                          |            |             |           |                       | 24.10 |
| 25.00 CMHC - CMHC                                                                                                                                                                |                          |            |             |           |                       | 25.00 |
| 26.00 RURAL HEALTH CLINIC                                                                                                                                                        |                          |            |             |           |                       | 26.00 |
| 26.25 FEDERALLY QUALIFIED HEALTH CENTER                                                                                                                                          | 0.00                     |            |             |           |                       | 26.25 |
| 27.00 Total (sum of lines 14-26)                                                                                                                                                 | 0.00                     |            |             |           |                       | 27.00 |
| 28.00 Observation Bed Days                                                                                                                                                       |                          |            |             |           |                       | 28.00 |
| 29.00 Ambulance Trips                                                                                                                                                            |                          |            |             |           |                       | 29.00 |
| 30.00 Employee discount days (see instruction)                                                                                                                                   |                          |            |             |           |                       | 30.00 |
| 31.00 Employee discount days - IRF                                                                                                                                               |                          |            |             |           |                       | 31.00 |
| 32.00 Labor & delivery days (see instructions)                                                                                                                                   |                          |            |             |           |                       | 32.00 |
| 32.01 Total ancillary labor & delivery room outpatient days (see instructions)                                                                                                   |                          |            |             |           |                       | 32.01 |
| 33.00 LTCH non-covered days                                                                                                                                                      |                          |            | 0           |           |                       | 33.00 |
| 33.01 LTCH site neutral days and discharges                                                                                                                                      |                          |            | 0           |           |                       | 33.01 |

## HOSPITAL WAGE INDEX INFORMATION

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-3  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                         | Wkst. A Line<br>Number                                                                | Amount<br>Reported | Reclassificati<br>on of Salaries<br>(from Wkst.<br>A-6) | Adjusted<br>Salaries<br>(col.2 ± col.<br>3) | Paid Hours<br>Related to<br>Salaries in<br>col. 4 | Average Hourly<br>Wage (col. 4 ÷<br>col. 5) |        |
|-----------------------------------------|---------------------------------------------------------------------------------------|--------------------|---------------------------------------------------------|---------------------------------------------|---------------------------------------------------|---------------------------------------------|--------|
|                                         | 1.00                                                                                  | 2.00               | 3.00                                                    | 4.00                                        | 5.00                                              | 6.00                                        |        |
| <b>PART II - WAGE DATA</b>              |                                                                                       |                    |                                                         |                                             |                                                   |                                             |        |
| <b>SALARIES</b>                         |                                                                                       |                    |                                                         |                                             |                                                   |                                             |        |
| 1.00                                    | Total salaries (see instructions)                                                     | 200.00             | 870,972,367                                             | 0                                           | 870,972,367                                       | 19,172,872.87                               | 45.43  |
| 2.00                                    | Non-physician anesthetist Part A                                                      |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 3.00                                    | Non-physician anesthetist Part B                                                      |                    | 0                                                       | 3,666,678                                   | 3,666,678                                         | 39,065.40                                   | 93.86  |
| 4.00                                    | Physician-Part A - Administrative                                                     |                    | 14,962,674                                              | 0                                           | 14,962,674                                        | 94,629.07                                   | 158.12 |
| 4.01                                    | Physicians - Part A - Teaching                                                        |                    | 5,428,474                                               | 0                                           | 5,428,474                                         | 44,918.43                                   | 120.85 |
| 5.00                                    | Physician and Non Physician-Part B                                                    |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 6.00                                    | Non-physician-Part B for hospital-based RHC and FQHC services                         |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 7.00                                    | Interns & residents (in an approved program)                                          | 21.00              | 41,678,379                                              | 2,257,893                                   | 43,936,272                                        | 1,593,139.55                                | 27.58  |
| 7.01                                    | Contracted interns and residents (in an approved programs)                            |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 8.00                                    | Home office and/or related organization personnel                                     |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 9.00                                    | SNF                                                                                   | 44.00              | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 10.00                                   | Excluded area salaries (see instructions)                                             |                    | 322,038,595                                             | 1,165,293                                   | 323,203,888                                       | 5,062,957.49                                | 63.84  |
| <b>OTHER WAGES &amp; RELATED COSTS</b>  |                                                                                       |                    |                                                         |                                             |                                                   |                                             |        |
| 11.00                                   | Contract labor: Direct Patient Care                                                   |                    | 1,816,242                                               | 0                                           | 1,816,242                                         | 36,997.48                                   | 49.09  |
| 12.00                                   | Contract labor: Top level management and other management and administrative services |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 13.00                                   | Contract labor: Physician-Part A - Administrative                                     |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 14.00                                   | Home office and/or related organization salaries and wage-related costs               |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 14.01                                   | Home office salaries                                                                  |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 14.02                                   | Related organization salaries                                                         |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 15.00                                   | Home office: Physician Part A - Administrative                                        |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| 16.00                                   | Home office and Contract Physicians Part A - Teaching                                 |                    | 0                                                       | 0                                           | 0                                                 | 0.00                                        | 0.00   |
| <b>WAGE-RELATED COSTS</b>               |                                                                                       |                    |                                                         |                                             |                                                   |                                             |        |
| 17.00                                   | Wage-related costs (core) (see instructions)                                          |                    | 105,364,888                                             | 0                                           | 105,364,888                                       |                                             |        |
| 18.00                                   | Wage-related costs (other) (see instructions)                                         |                    | 19,656,377                                              | 0                                           | 19,656,377                                        |                                             |        |
| 19.00                                   | Excluded areas                                                                        |                    | 75,352,483                                              | 0                                           | 75,352,483                                        |                                             |        |
| 20.00                                   | Non-physician anesthetist Part A                                                      |                    | 0                                                       | 0                                           | 0                                                 |                                             |        |
| 21.00                                   | Non-physician anesthetist Part B                                                      |                    | 719,044                                                 | 0                                           | 719,044                                           |                                             |        |
| 22.00                                   | Physician Part A - Administrative                                                     |                    | 2,455,309                                               | 0                                           | 2,455,309                                         |                                             |        |
| 22.01                                   | Physician Part A - Teaching                                                           |                    | 969,049                                                 | 0                                           | 969,049                                           |                                             |        |
| 23.00                                   | Physician Part B                                                                      |                    | 0                                                       | 0                                           | 0                                                 |                                             |        |
| 24.00                                   | Wage-related costs (RHC/FQHC)                                                         |                    | 0                                                       | 0                                           | 0                                                 |                                             |        |
| 25.00                                   | Interns & residents (in an approved program)                                          |                    | 16,932,413                                              | 0                                           | 16,932,413                                        |                                             |        |
| 25.50                                   | Home office wage-related (core)                                                       |                    | 0                                                       | 0                                           | 0                                                 |                                             |        |
| 25.51                                   | Related organization wage-related (core)                                              |                    | 0                                                       | 0                                           | 0                                                 |                                             |        |
| 25.52                                   | Home office: Physician Part A - Administrative - wage-related (core)                  |                    | 0                                                       | 0                                           | 0                                                 |                                             |        |
| 25.53                                   | Home office & Contract Physicians Part A - Teaching - wage-related (core)             |                    | 0                                                       | 0                                           | 0                                                 |                                             |        |
| <b>OVERHEAD COSTS - DIRECT SALARIES</b> |                                                                                       |                    |                                                         |                                             |                                                   |                                             |        |
| 26.00                                   | Employee Benefits Department                                                          | 4.00               | 4,164,504                                               | -2,914                                      | 4,161,590                                         | 157,486.37                                  | 26.43  |
| 27.00                                   | Administrative & General                                                              | 5.00               | 145,080,118                                             | -868,472                                    | 144,211,646                                       | 2,706,283.32                                | 53.29  |

## HOSPITAL WAGE INDEX INFORMATION

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-3  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

|       | Wkst. A Line<br>Number                              | Amount<br>Reported | Reclassificati<br>on of Salaries<br>(from Wkst.<br>A-6) | Adjusted<br>Salaries<br>(col.2 ± col.<br>3) | Paid Hours<br>Related to<br>Salaries in<br>col. 4 | Average Hourly<br>Wage (col. 4 ÷<br>col. 5) |       |
|-------|-----------------------------------------------------|--------------------|---------------------------------------------------------|---------------------------------------------|---------------------------------------------------|---------------------------------------------|-------|
|       | 1.00                                                | 2.00               | 3.00                                                    | 4.00                                        | 5.00                                              | 6.00                                        |       |
| 28.00 | Administrative & General under contract (see inst.) | 25,632,839         | 0                                                       | 25,632,839                                  | 113,924.00                                        | 225.00                                      | 28.00 |
| 29.00 | Maintenance & Repairs                               | 6.00 7,977,639     | -127,434                                                | 7,850,205                                   | 270,320.01                                        | 29.04                                       | 29.00 |
| 30.00 | Operation of Plant                                  | 7.00 0             | 0                                                       | 0                                           | 0.00                                              | 0.00                                        | 30.00 |
| 31.00 | Laundry & Linen Service                             | 8.00 770,951       | 0                                                       | 770,951                                     | 34,532.61                                         | 22.33                                       | 31.00 |
| 32.00 | Housekeeping                                        | 9.00 18,962,442    | 0                                                       | 18,962,442                                  | 834,003.64                                        | 22.74                                       | 32.00 |
| 33.00 | Housekeeping under contract (see instructions)      | 0                  | 0                                                       | 0                                           | 0.00                                              | 0.00                                        | 33.00 |
| 34.00 | Dietary                                             | 10.00 6,950,517    | 0                                                       | 6,950,517                                   | 303,634.34                                        | 22.89                                       | 34.00 |
| 35.00 | Dietary under contract (see instructions)           | 0                  | 0                                                       | 0                                           | 0.00                                              | 0.00                                        | 35.00 |
| 36.00 | Cafeteria                                           | 11.00 1,473,577    | 0                                                       | 1,473,577                                   | 70,876.02                                         | 20.79                                       | 36.00 |
| 37.00 | Maintenance of Personnel                            | 12.00 0            | 0                                                       | 0                                           | 0.00                                              | 0.00                                        | 37.00 |
| 38.00 | Nursing Administration                              | 13.00 10,936,110   | 0                                                       | 10,936,110                                  | 207,375.37                                        | 52.74                                       | 38.00 |
| 39.00 | Central Services and Supply                         | 14.00 0            | 0                                                       | 0                                           | 0.00                                              | 0.00                                        | 39.00 |
| 40.00 | Pharmacy                                            | 15.00 12,712,041   | -632,998                                                | 12,079,043                                  | 283,196.93                                        | 42.65                                       | 40.00 |
| 41.00 | Medical Records & Medical Records Library           | 16.00 16,707,009   | -608                                                    | 16,706,401                                  | 420,925.45                                        | 39.69                                       | 41.00 |
| 42.00 | Social Service                                      | 17.00 0            | 0                                                       | 0                                           | 0.00                                              | 0.00                                        | 42.00 |
| 43.00 | Other General Service                               | 18.00 35,922,857   | -2,103,402                                              | 33,819,455                                  | 669,708.26                                        | 50.50                                       | 43.00 |

## HOSPITAL WAGE INDEX INFORMATION

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-3  
Part III  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                        | Worksheet A<br>Line Number                       | Amount<br>Reported | Reclassificati<br>on of Salaries<br>(from<br>Worksheet A-6) | Adjusted<br>Salaries<br>(col.2 ± col.<br>3) | Paid Hours<br>Related to<br>Salaries in<br>col. 4 | Average Hourly<br>Wage (col. 4 ÷<br>col. 5) |      |
|----------------------------------------|--------------------------------------------------|--------------------|-------------------------------------------------------------|---------------------------------------------|---------------------------------------------------|---------------------------------------------|------|
|                                        | 1.00                                             | 2.00               | 3.00                                                        | 4.00                                        | 5.00                                              | 6.00                                        |      |
| PART III - HOSPITAL WAGE INDEX SUMMARY |                                                  |                    |                                                             |                                             |                                                   |                                             |      |
| 1.00                                   | Net salaries (see instructions)                  | 849,498,353        | -5,924,571                                                  | 843,573,782                                 | 17,609,673.49                                     | 47.90                                       | 1.00 |
| 2.00                                   | Excluded area salaries (see instructions)        | 322,038,595        | 1,165,293                                                   | 323,203,888                                 | 5,062,957.49                                      | 63.84                                       | 2.00 |
| 3.00                                   | Subtotal salaries (line 1 minus line 2)          | 527,459,758        | -7,089,864                                                  | 520,369,894                                 | 12,546,716.00                                     | 41.47                                       | 3.00 |
| 4.00                                   | Subtotal other wages & related costs (see inst.) | 1,816,242          | 0                                                           | 1,816,242                                   | 36,997.48                                         | 49.09                                       | 4.00 |
| 5.00                                   | Subtotal wage-related costs (see inst.)          | 127,476,574        | 0                                                           | 127,476,574                                 | 0.00                                              | 24.50                                       | 5.00 |
| 6.00                                   | Total (sum of lines 3 thru 5)                    | 656,752,574        | -7,089,864                                                  | 649,662,710                                 | 12,583,713.48                                     | 51.63                                       | 6.00 |
| 7.00                                   | Total overhead cost (see instructions)           | 287,290,604        | -3,735,828                                                  | 283,554,776                                 | 6,072,266.32                                      | 46.70                                       | 7.00 |

| HOSPITAL WAGE RELATED COSTS                               |                                                                                                                             | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet S-3<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|-----------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|-----------------------------------------------------------------------|
|                                                           |                                                                                                                             |                       |                                             | Amount<br>Reported                                                    |
|                                                           |                                                                                                                             |                       |                                             | 1.00                                                                  |
| PART IV - WAGE RELATED COSTS                              |                                                                                                                             |                       |                                             |                                                                       |
| Part A - Core List                                        |                                                                                                                             |                       |                                             |                                                                       |
| RETIREMENT COST                                           |                                                                                                                             |                       |                                             |                                                                       |
| 1.00                                                      | 401K Employer Contributions                                                                                                 |                       |                                             | 0 1.00                                                                |
| 2.00                                                      | Tax Sheltered Annuity (TSA) Employer Contribution                                                                           |                       | 18,538,284                                  | 2.00                                                                  |
| 3.00                                                      | Nonqualified Defined Benefit Plan Cost (see instructions)                                                                   |                       | 0                                           | 3.00                                                                  |
| 4.00                                                      | Qualified Defined Benefit Plan Cost (see instructions)                                                                      |                       | 35,341,496                                  | 4.00                                                                  |
| PLAN ADMINISTRATIVE COSTS (Paid to External Organization) |                                                                                                                             |                       |                                             |                                                                       |
| 5.00                                                      | 401K/TSA Plan Administration fees                                                                                           |                       | 0                                           | 5.00                                                                  |
| 6.00                                                      | Legal/Accounting/Management Fees-Pension Plan                                                                               |                       | 0                                           | 6.00                                                                  |
| 7.00                                                      | Employee Managed Care Program Administration Fees                                                                           |                       | 0                                           | 7.00                                                                  |
| HEALTH AND INSURANCE COST                                 |                                                                                                                             |                       |                                             |                                                                       |
| 8.00                                                      | Health Insurance (Purchased or Self Funded)                                                                                 |                       | 0                                           | 8.00                                                                  |
| 8.01                                                      | Health Insurance (Self Funded without a Third Party Administrator)                                                          |                       | 0                                           | 8.01                                                                  |
| 8.02                                                      | Health Insurance (Self Funded with a Third Party Administrator)                                                             |                       | 72,186,195                                  | 8.02                                                                  |
| 8.03                                                      | Health Insurance (Purchased)                                                                                                |                       | 0                                           | 8.03                                                                  |
| 9.00                                                      | Prescription Drug Plan                                                                                                      |                       | 0                                           | 9.00                                                                  |
| 10.00                                                     | Dental, Hearing and Vision Plan                                                                                             |                       | 1,894,410                                   | 10.00                                                                 |
| 11.00                                                     | Life Insurance (If employee is owner or beneficiary)                                                                        |                       | 4,473,844                                   | 11.00                                                                 |
| 12.00                                                     | Accident Insurance (If employee is owner or beneficiary)                                                                    |                       | 0                                           | 12.00                                                                 |
| 13.00                                                     | Disability Insurance (If employee is owner or beneficiary)                                                                  |                       | 0                                           | 13.00                                                                 |
| 14.00                                                     | Long-Term Care Insurance (If employee is owner or beneficiary)                                                              |                       | 0                                           | 14.00                                                                 |
| 15.00                                                     | 'Workers' Compensation Insurance                                                                                            |                       | 4,914,583                                   | 15.00                                                                 |
| 16.00                                                     | Retirement Health Care Cost (Only current year, not the extraordinary accrual required by FASB 106. Non cumulative portion) |                       | 242,079                                     | 16.00                                                                 |
| TAXES                                                     |                                                                                                                             |                       |                                             |                                                                       |
| 17.00                                                     | FICA-Employers Portion Only                                                                                                 |                       | 57,320,052                                  | 17.00                                                                 |
| 18.00                                                     | Medicare Taxes - Employers Portion Only                                                                                     |                       | 0                                           | 18.00                                                                 |
| 19.00                                                     | Unemployment Insurance                                                                                                      |                       | 1,270,356                                   | 19.00                                                                 |
| 20.00                                                     | State or Federal Unemployment Taxes                                                                                         |                       | 0                                           | 20.00                                                                 |
| OTHER                                                     |                                                                                                                             |                       |                                             |                                                                       |
| 21.00                                                     | Executive Deferred Compensation (Other Than Retirement Cost Reported on lines 1 through 4 above. (see instructions))        |                       | 0                                           | 21.00                                                                 |
| 22.00                                                     | Day Care Cost and Allowances                                                                                                |                       | 0                                           | 22.00                                                                 |
| 23.00                                                     | Tuition Reimbursement                                                                                                       |                       | 5,611,886                                   | 23.00                                                                 |
| 24.00                                                     | Total Wage Related cost (Sum of lines 1 -23)                                                                                |                       | 201,793,185                                 | 24.00                                                                 |
| Part B - Other than Core Related Cost                     |                                                                                                                             |                       |                                             |                                                                       |
| 25.00                                                     | VARIOUS                                                                                                                     |                       | 19,656,377                                  | 25.00                                                                 |

## HOSPITAL CONTRACT LABOR AND BENEFIT COST

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet S-3  
Part V  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                               |                                                  | Contract Labor | Benefit Cost |       |
|-------------------------------------------------------|--------------------------------------------------|----------------|--------------|-------|
|                                                       |                                                  | 1.00           | 2.00         |       |
| PART V - Contract Labor and Benefit Cost              |                                                  |                |              |       |
| Hospital and Hospital-Based Component Identification: |                                                  |                |              |       |
| 1.00                                                  | Total facility's contract labor and benefit cost | 1,816,242      | 201,793,185  | 1.00  |
| 2.00                                                  | Hospital                                         | 1,816,242      | 201,793,185  | 2.00  |
| 3.00                                                  | Subprovider - IPF                                | 0              | 0            | 3.00  |
| 4.00                                                  | Subprovider - IRF                                | 0              | 0            | 4.00  |
| 5.00                                                  | Subprovider - (Other)                            | 0              | 0            | 5.00  |
| 6.00                                                  | Swing Beds - SNF                                 | 0              | 0            | 6.00  |
| 7.00                                                  | Swing Beds - NF                                  | 0              | 0            | 7.00  |
| 8.00                                                  | Hospital-Based SNF                               |                |              | 8.00  |
| 9.00                                                  | Hospital-Based NF                                |                |              | 9.00  |
| 10.00                                                 | Hospital-Based OLTC                              |                |              | 10.00 |
| 11.00                                                 | Hospital-Based HHA                               |                |              | 11.00 |
| 12.00                                                 | Separately Certified ASC                         |                |              | 12.00 |
| 13.00                                                 | Hospital-Based Hospice                           |                |              | 13.00 |
| 14.00                                                 | Hospital-Based Health Clinic RHC                 |                |              | 14.00 |
| 15.00                                                 | Hospital-Based Health Clinic FQHC                |                |              | 15.00 |
| 16.00                                                 | Hospital-Based-CMHC                              |                |              | 16.00 |
| 17.00                                                 | Renal Dialysis                                   | 0              | 0            | 17.00 |
| 18.00                                                 | Other                                            | 0              | 0            | 18.00 |

## HOSPITAL UNCOMPENSATED AND INDIGENT CARE DATA

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet S-10

Date/Time Prepared:  
11/24/2019 4:22 pm

|                                                                                                                                                 |                                                                                                                                                                             |                    |                  |                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------|------------------|-------------------------|
|                                                                                                                                                 |                                                                                                                                                                             |                    | 1.00             |                         |
| <b>Uncompensated and indigent care cost computation</b>                                                                                         |                                                                                                                                                                             |                    |                  |                         |
| 1.00                                                                                                                                            | Cost to charge ratio (Worksheet C, Part I line 202 column 3 divided by line 202 column 8)                                                                                   |                    | 0.276328         | 1.00                    |
| <b>Medicaid (see instructions for each line)</b>                                                                                                |                                                                                                                                                                             |                    |                  |                         |
| 2.00                                                                                                                                            | Net revenue from Medicaid                                                                                                                                                   |                    | 153,604,154      | 2.00                    |
| 3.00                                                                                                                                            | Did you receive DSH or supplemental payments from Medicaid?                                                                                                                 |                    | Y                | 3.00                    |
| 4.00                                                                                                                                            | If line 3 is yes, does line 2 include all DSH and/or supplemental payments from Medicaid?                                                                                   |                    | N                | 4.00                    |
| 5.00                                                                                                                                            | If line 4 is no, then enter DSH and/or supplemental payments from Medicaid                                                                                                  |                    | 24,997,782       | 5.00                    |
| 6.00                                                                                                                                            | Medicaid charges                                                                                                                                                            |                    | 853,724,957      | 6.00                    |
| 7.00                                                                                                                                            | Medicaid cost (line 1 times line 6)                                                                                                                                         |                    | 235,908,110      | 7.00                    |
| 8.00                                                                                                                                            | Difference between net revenue and costs for Medicaid program (line 7 minus sum of lines 2 and 5; if < zero then enter zero)                                                |                    | 57,306,174       | 8.00                    |
| <b>Children's Health Insurance Program (CHIP) (see instructions for each line)</b>                                                              |                                                                                                                                                                             |                    |                  |                         |
| 9.00                                                                                                                                            | Net revenue from stand-alone CHIP                                                                                                                                           |                    | 0                | 9.00                    |
| 10.00                                                                                                                                           | Stand-alone CHIP charges                                                                                                                                                    |                    | 0                | 10.00                   |
| 11.00                                                                                                                                           | Stand-alone CHIP cost (line 1 times line 10)                                                                                                                                |                    | 0                | 11.00                   |
| 12.00                                                                                                                                           | Difference between net revenue and costs for stand-alone CHIP (line 11 minus line 9; if < zero then enter zero)                                                             |                    | 0                | 12.00                   |
| <b>Other state or local government indigent care program (see instructions for each line)</b>                                                   |                                                                                                                                                                             |                    |                  |                         |
| 13.00                                                                                                                                           | Net revenue from state or local indigent care program (Not included on lines 2, 5 or 9)                                                                                     |                    | 7,424            | 13.00                   |
| 14.00                                                                                                                                           | Charges for patients covered under state or local indigent care program (Not included in lines 6 or 10)                                                                     |                    | 145,896          | 14.00                   |
| 15.00                                                                                                                                           | State or local indigent care program cost (line 1 times line 14)                                                                                                            |                    | 40,315           | 15.00                   |
| 16.00                                                                                                                                           | Difference between net revenue and costs for state or local indigent care program (line 15 minus line 13; if < zero then enter zero)                                        |                    | 32,891           | 16.00                   |
| <b>Grants, donations and total unreimbursed cost for Medicaid, CHIP and state/local indigent care programs (see instructions for each line)</b> |                                                                                                                                                                             |                    |                  |                         |
| 17.00                                                                                                                                           | Private grants, donations, or endowment income restricted to funding charity care                                                                                           |                    | 1,199,817        | 17.00                   |
| 18.00                                                                                                                                           | Government grants, appropriations or transfers for support of hospital operations                                                                                           |                    | 0                | 18.00                   |
| 19.00                                                                                                                                           | Total unreimbursed cost for Medicaid, CHIP and state and local indigent care programs (sum of lines 8, 12 and 16)                                                           |                    | 57,339,065       | 19.00                   |
|                                                                                                                                                 |                                                                                                                                                                             | Uninsured patients | Insured patients | Total (col. 1 + col. 2) |
|                                                                                                                                                 |                                                                                                                                                                             | 1.00               | 2.00             | 3.00                    |
| <b>Uncompensated Care (see instructions for each line)</b>                                                                                      |                                                                                                                                                                             |                    |                  |                         |
| 20.00                                                                                                                                           | Charity care charges and uninsured discounts for the entire facility (see instructions)                                                                                     | 62,467,323         | 7,154,339        | 69,621,662              |
| 21.00                                                                                                                                           | Cost of patients approved for charity care and uninsured discounts (see instructions)                                                                                       | 17,261,470         | 7,154,339        | 24,415,809              |
| 22.00                                                                                                                                           | Payments received from patients for amounts previously written off as charity care                                                                                          | 114,913            | 170,409          | 285,322                 |
| 23.00                                                                                                                                           | Cost of charity care (line 21 minus line 22)                                                                                                                                | 17,146,557         | 6,983,930        | 24,130,487              |
|                                                                                                                                                 |                                                                                                                                                                             |                    |                  | 1.00                    |
| 24.00                                                                                                                                           | Does the amount on line 20 column 2, include charges for patient days beyond a length of stay limit imposed on patients covered by Medicaid or other indigent care program? |                    | N                | 24.00                   |
| 25.00                                                                                                                                           | If line 24 is yes, enter the charges for patient days beyond the indigent care program's length of stay limit                                                               |                    | 0                | 25.00                   |
| 26.00                                                                                                                                           | Total bad debt expense for the entire hospital complex (see instructions)                                                                                                   |                    | 30,178,844       | 26.00                   |
| 27.00                                                                                                                                           | Medicare reimbursable bad debts for the entire hospital complex (see instructions)                                                                                          |                    | 3,769,484        | 27.00                   |
| 27.01                                                                                                                                           | Medicare allowable bad debts for the entire hospital complex (see instructions)                                                                                             |                    | 5,799,206        | 27.01                   |
| 28.00                                                                                                                                           | Non-Medicare bad debt expense (see instructions)                                                                                                                            |                    | 24,379,638       | 28.00                   |
| 29.00                                                                                                                                           | Cost of non-Medicare and non-reimbursable Medicare bad debt expense (see instructions)                                                                                      |                    | 8,766,499        | 29.00                   |
| 30.00                                                                                                                                           | Cost of uncompensated care (line 23 column 3 plus line 29)                                                                                                                  |                    | 32,896,986       | 30.00                   |
| 31.00                                                                                                                                           | Total unreimbursed and uncompensated care cost (line 19 plus line 30)                                                                                                       |                    | 90,236,051       | 31.00                   |

## RECLASSIFICATION AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | Salaries                             | Other       | Total (col. 1<br>+ col. 2) | Reclassification<br>ons (See A-6) | Reclassified<br>Trial Balance<br>(col. 3 +<br>col. 4) |       |
|------------------------------|-------|--------------------------------------|-------------|----------------------------|-----------------------------------|-------------------------------------------------------|-------|
|                              |       | 1.00                                 | 2.00        | 3.00                       | 4.00                              | 5.00                                                  |       |
| GENERAL SERVICE COST CENTERS |       |                                      |             |                            |                                   |                                                       |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            | 0           | 0                          | 0                                 | 0                                                     | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            | -86,063,678 | -86,063,678                | 87,282,806                        | 1,219,128                                             | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             | 0           | 0                          | 6,343,920                         | 6,343,920                                             | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             | 0           | 0                          | 4,696,203                         | 4,696,203                                             | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             | 0           | 0                          | 5,496,718                         | 5,496,718                                             | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              | 0           | 0                          | 7,477,816                         | 7,477,816                                             | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          | 0           | 0                          | 1,335,586                         | 1,335,586                                             | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          | 0           | 0                          | 866,827                           | 866,827                                               | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 | 0           | 0                          | 346,213                           | 346,213                                               | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       | 0           | 0                          | 804,422                           | 804,422                                               | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            | 0           | 0                          | 1,606,287                         | 1,606,287                                             | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     | 0           | 0                          | 476,320                           | 476,320                                               | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     | 0           | 0                          | 0                                 | 0                                                     | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               | 0           | 0                          | 50,029,956                        | 50,029,956                                            | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             | 0           | 0                          | 551,534                           | 551,534                                               | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 | 0           | 0                          | 31,147                            | 31,147                                                | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    | 0           | 0                          | 1,410,661                         | 1,410,661                                             | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   | 0           | 0                          | 17,971,484                        | 17,971,484                                            | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            | 0           | 0                          | 0                                 | 0                                                     | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     | 0           | 0                          | 2,175,108                         | 2,175,108                                             | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 | 0           | 0                          | 1,814,631                         | 1,814,631                                             | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   | 0           | 0                          | 2,822,386                         | 2,822,386                                             | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              | 0           | 0                          | 343,813                           | 343,813                                               | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         | 0           | 0                          | 599,566                           | 599,566                                               | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                | 0           | 0                          | 16,073                            | 16,073                                                | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       | 0           | 0                          | 8,684,970                         | 8,684,970                                             | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              | 0           | 0                          | 103,422                           | 103,422                                               | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 4,164,504   | 22,096,431                 | 26,260,935                        | 182,722,261                                           | 4.00  |
| 5.01                         | 00500 | TRANSITION RECRUITMENT               | 0           | 65,787,756                 | 65,787,756                        | 0                                                     | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0           | 6,913,483                  | 6,913,483                         | 964,594                                               | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 5,341,100   | 12,091,994                 | 17,433,094                        | -8,894,706                                            | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 3,618,548   | 3,205,098                  | 6,823,646                         | -1,008,055                                            | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 3,328,229   | 1,074,326                  | 4,402,555                         | -947,090                                              | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 1,645,760   | 639,791                    | 2,285,551                         | -1,982,329                                            | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 19,442,482  | 18,324,570                 | 37,767,052                        | 44,491,113                                            | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 5,294,237   | 4,469,095                  | 9,763,332                         | -1,093,504                                            | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 12,262,425  | 7,907,556                  | 20,169,981                        | -4,469,397                                            | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 6,782,457   | 3,696,312                  | 10,478,769                        | -2,025,051                                            | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 87,364,880  | 172,282,034                | 259,646,914                       | -59,479,033                                           | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 7,977,639   | 60,217,222                 | 68,194,861                        | -3,844,619                                            | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0           | 0                          | 0                                 | 0                                                     | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 770,951     | 3,853,286                  | 4,624,237                         | -846,911                                              | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 18,962,442  | 7,754,459                  | 26,716,901                        | -4,547,227                                            | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 374,287     | 251,611                    | 625,898                           | -231,349                                              | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 6,576,230   | 5,560,228                  | 12,136,458                        | -3,528,736                                            | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 1,473,577   | 2,537,256                  | 4,010,833                         | -1,625,146                                            | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 10,936,110  | 8,081,024                  | 19,017,134                        | -3,640,583                                            | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0           | 3,118,080                  | 3,118,080                         | -3,110,641                                            | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 12,712,041  | 158,005,373                | 170,717,414                       | -153,029,036                                          | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 4,946,084   | 5,225,150                  | 10,171,234                        | -2,193,243                                            | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 11,760,925  | 5,916,383                  | 17,677,308                        | -3,587,848                                            | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 570,341     | 137,137                    | 707,478                           | -136,882                                              | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               | 126,859     | 139,529                    | 266,388                           | -25,853                                               | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 1,737,813   | 962,817                    | 2,700,630                         | -699,699                                              | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 2,028,031   | 1,292,521                  | 3,320,552                         | 30,147                                                | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 76,757      | 13,054                     | 89,811                            | 141,975                                               | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 51,951      | 1,715,160                  | 1,767,111                         | -1,016,277                                            | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 11,898      | 1,626,769                  | 1,638,667                         | 168,215                                               | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0           | 0                          | 0                                 | 0                                                     | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 1,667,479   | 366,605                    | 2,034,084                         | 80,041                                                | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 935,916     | 1,790,155                  | 2,726,071                         | -322,313                                              | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 5,631,975   | 6,253,485                  | 11,885,460                        | -3,753,961                                            | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 8,904,910   | -8,741,605                 | 163,305                           | 13,109,069                                            | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 14,178,927  | 14,105,831                 | 28,284,758                        | -11,589,743                                           | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0           | 0                          | 0                                 | 3,666,678                                             | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0           | 0                          | 0                                 | 6,243,138                                             | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 41,678,379  | 22,535,872                 | 64,214,251                        | -17,466,495                                           | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 6,458,347   | 4,644,352                  | 11,102,699                        | -2,521,313                                            | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 2,059,194   | 8,624,233                  | 10,683,427                        | -9,222,251                                            | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 520,319     | 213,109                    | 733,428                           | 77,530                                                | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 315,462     | 141,384                    | 456,846                           | 26,495                                                | 23.02 |

## RECLASSIFICATION AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | Salaries    | Other       | Total (col. 1<br>+ col. 2) | Reclassificati<br>ons (See A-6) | Reclassified<br>Trial Balance<br>(col. 3 +-<br>col. 4) |        |
|----------------------------------------|-------|----------------------------------------|-------------|-------------|----------------------------|---------------------------------|--------------------------------------------------------|--------|
|                                        |       |                                        | 1.00        | 2.00        | 3.00                       | 4.00                            | 5.00                                                   |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 1,173,586   | 614,166     | 1,787,752                  | 191,676                         | 1,979,428                                              | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 934,985     | 421,262     | 1,356,247                  | 111,947                         | 1,468,194                                              | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0           | -6,784      | -6,784                     | 254,385                         | 247,601                                                | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 140,650     | 31,859      | 172,509                    | 382,910                         | 555,419                                                | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 516,330     | 224,757     | 741,087                    | 133,402                         | 874,489                                                | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 227,910     | 137,763     | 365,673                    | 75,448                          | 441,121                                                | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0           | 0           | 0                          | 658,435                         | 658,435                                                | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 445,027     | 195,789     | 640,816                    | 86,109                          | 726,925                                                | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 775,725     | 446,040     | 1,221,765                  | 156,369                         | 1,378,134                                              | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |             |             |                            |                                 |                                                        |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 57,296,734  | 43,034,720  | 100,331,454                | -36,473,244                     | 63,858,210                                             | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 14,529,032  | 9,242,685   | 23,771,717                 | -6,806,534                      | 16,965,183                                             | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 16,511,000  | 10,554,781  | 27,065,781                 | -7,543,113                      | 19,522,668                                             | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 4,908,022   | 3,038,349   | 7,946,371                  | -2,153,657                      | 5,792,714                                              | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 10,690,427  | 6,836,339   | 17,526,766                 | -5,532,809                      | 11,993,957                                             | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 4,386,271   | 3,469,367   | 7,855,638                  | -3,366,581                      | 4,489,057                                              | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 4,150,579   | 3,200,771   | 7,351,350                  | -2,906,546                      | 4,444,804                                              | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0           | 0           | 0                          | 3,295,759                       | 3,295,759                                              | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |             |             |                            |                                 |                                                        |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 15,400,849  | 106,892,338 | 122,293,187                | -98,090,076                     | 24,203,111                                             | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 4,869,373   | 3,827,268   | 8,696,641                  | -3,344,189                      | 5,352,452                                              | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 4,944,647   | 3,784,476   | 8,729,123                  | -2,823,267                      | 5,905,856                                              | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 4,759,716   | 5,902,992   | 10,662,708                 | -5,849,304                      | 4,813,404                                              | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 14,501,404  | 22,697,787  | 37,199,191                 | -17,941,092                     | 19,258,099                                             | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 3,753,114   | 7,680,004   | 11,433,118                 | -2,909,222                      | 8,523,896                                              | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 771,983     | 3,446,219   | 4,218,202                  | -615,073                        | 3,603,129                                              | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 24,113,472  | 44,010,220  | 68,123,692                 | -12,059,167                     | 56,064,525                                             | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 557,452     | 1,295,352   | 1,852,804                  | -244,083                        | 1,608,721                                              | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0           | 0           | 0                          | 0                               | 0                                                      | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 2,085,088   | 9,318,678   | 11,403,766                 | -1,060,641                      | 10,343,125                                             | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0           | 1,577       | 1,577                      | 0                               | 1,577                                                  | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 5,370,019   | 5,748,807   | 11,118,826                 | -1,791,742                      | 9,327,084                                              | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 4,278,384   | 2,202,035   | 6,480,419                  | -1,980,202                      | 4,500,217                                              | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 3,278,059   | 1,771,849   | 5,049,908                  | -1,686,466                      | 3,363,442                                              | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 2,227,978   | 1,494,144   | 3,722,122                  | -1,180,842                      | 2,541,280                                              | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 4,565,840   | 21,521,662  | 26,087,502                 | -20,433,569                     | 5,653,933                                              | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 1,206,125   | 624,270     | 1,830,395                  | -480,022                        | 1,350,373                                              | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0           | 0           | 0                          | 35,105,607                      | 35,105,607                                             | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0           | 0           | 0                          | 76,674,620                      | 76,674,620                                             | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0           | 0           | 0                          | 147,865,710                     | 147,865,710                                            | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0           | 0           | 0                          | 0                               | 0                                                      | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0           | 3,350,004   | 3,350,004                  | -62,694                         | 3,287,310                                              | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 2,605,791   | 1,538,608   | 4,144,399                  | -1,145,056                      | 2,999,343                                              | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |             |             |                            |                                 |                                                        |        |
| 90.00                                  | 09000 | CLINIC                                 | 25,451,096  | 56,247,437  | 81,698,533                 | -16,649,131                     | 65,049,402                                             | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 10,463,676  | 8,300,115   | 18,763,791                 | -6,374,406                      | 12,389,385                                             | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0           | 0           | 0                          | 0                               | 0                                                      | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0           | 0           | 0                          | 0                               | 0                                                      | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0           | 0           | 0                          | 0                               | 0                                                      | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |             |             |                            |                                 |                                                        |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0           | 0           | 0                          | 0                               | 0                                                      | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0           | 0           | 0                          | 0                               | 0                                                      | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0           | 0           | 0                          | 0                               | 0                                                      | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |             |             |                            |                                 |                                                        |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 1,458,067   | 5,049,519   | 6,507,586                  | -477,141                        | 6,030,445                                              | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0           | 0           | 0                          | 0                               | 0                                                      | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 732,182     | 1,515,033   | 2,247,215                  | -215,100                        | 2,032,115                                              | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0           | 0           | 0                          | 0                               | 0                                                      | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 73,449      | 237,445     | 310,894                    | -17,937                         | 292,957                                                | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0           | 0           | 0                          | 0                               | 0                                                      | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0           | 0           | 0                          | 0                               | 0                                                      | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 566,843,508 | 948,664,951 | 1,515,508,459              | 150,949,305                     | 1,666,457,764                                          | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |             |             |                            |                                 |                                                        |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 1,089,716   | 3,854,495   | 4,944,211                  | -1,758,891                      | 3,185,320                                              | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 7,930,121   | 3,469,543   | 11,399,664                 | -1,689,783                      | 9,709,881                                              | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 1,560,087   | 795,646     | 2,355,733                  | -374,421                        | 1,981,312                                              | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 22,820,861  | 18,532,581  | 41,353,442                 | -10,227                         | 41,343,215                                             | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 21,512,294  | 12,116,378  | 33,628,672                 | -394,519                        | 33,234,153                                             | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 2,848,386   | 31,910,918  | 34,759,304                 | -29,769,842                     | 4,989,462                                              | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 211,732,419 | 136,308,312 | 348,040,731                | -99,112,856                     | 248,927,875                                            | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 15,784,753  | 19,122,229  | 34,906,982                 | -12,076,515                     | 22,830,467                                             | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 8,000,985   | 50,175,040  | 58,176,025                 | -2,229,718                      | 55,946,307                                             | 194.01 |

## RECLASSIFICATION AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                      | Salaries    | Other         | Total (col. 1<br>+ col. 2) | Reclassificati<br>ons (See A-6) | Reclassified<br>Trial Balance<br>(col. 3 +-<br>col. 4) |        |
|-------------------------|-------|--------------------------------------|-------------|---------------|----------------------------|---------------------------------|--------------------------------------------------------|--------|
|                         |       |                                      | 1.00        | 2.00          | 3.00                       | 4.00                            | 5.00                                                   |        |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                  | 873,719     | 2,540,722     | 3,414,441                  | -1,549,283                      | 1,865,158                                              | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES            | 9,862,695   | 27,291,247    | 37,153,942                 | -1,959,471                      | 35,194,471                                             | 194.03 |
| 194.04                  | 07954 | CON - GNE                            | 112,823     | 98,087        | 210,910                    | -23,779                         | 187,131                                                | 194.04 |
| 200.00                  |       | TOTAL (SUM OF LINES 118 through 199) | 870,972,367 | 1,254,880,149 | 2,125,852,516              | 0                               | 2,125,852,516                                          | 200.00 |

RECLASSIFICATION AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | Adjustments                          | Net Expenses   |             |       |
|------------------------------|-------|--------------------------------------|----------------|-------------|-------|
|                              |       | (See A-8)                            | For Allocation |             |       |
|                              |       | 6.00                                 | 7.00           |             |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                |             |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            | 0              | 0           | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            | 0              | 1,219,128   | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             | 0              | 6,343,920   | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             | 0              | 4,696,203   | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             | 0              | 5,496,718   | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              | 0              | 7,477,816   | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          | 0              | 1,335,586   | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          | 0              | 866,827     | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 | 0              | 346,213     | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       | 0              | 804,422     | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            | 0              | 1,606,287   | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     | 242,516        | 718,836     | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     | 0              | 0           | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               | -47,704        | 49,982,252  | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             | 0              | 551,534     | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 | 0              | 31,147      | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    | 0              | 1,410,661   | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   | 0              | 17,971,484  | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            | 0              | 0           | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     | -2,175,108     | 0           | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 | -1,814,631     | 0           | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   | -2,822,386     | 0           | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              | -343,813       | 0           | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         | -599,566       | 0           | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                | -16,073        | 0           | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       | -8,684,970     | 0           | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              | -103,422       | 0           | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | -5,866,056     | 203,117,140 | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | -65,701,585    | 86,171      | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | -13,746,981    | -5,868,904  | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | -205,270       | 8,333,118   | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | -2,358         | 5,813,233   | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0              | 3,455,465   | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0              | 303,222     | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | -2,802,425     | 79,455,740  | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0              | 8,669,828   | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | -1,141,617     | 14,558,967  | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | -171,383       | 8,282,335   | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | -72,207,238    | 127,960,643 | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | -996,128       | 63,354,114  | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0              | 0           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | -57,418        | 3,719,908   | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | -74,354        | 22,095,320  | 9.00  |
| 10.00                        | 01000 | DIETARY                              | -1,475         | 393,074     | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | -52,570        | 8,555,152   | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | -2,303,049     | 82,638      | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | -341,313       | 15,035,238  | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0              | 7,439       | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0              | 17,688,378  | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | -60            | 7,977,931   | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | -164,505       | 13,924,955  | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | -191,178       | 379,418     | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               | -152,948       | 87,587      | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | -624,854       | 1,376,077   | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | -1,121,155     | 2,229,544   | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | -253,184       | -21,398     | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | -73,727        | 677,107     | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | -191,179       | 1,615,703   | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0              | 0           | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | -787,451       | 1,326,674   | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0              | 2,403,758   | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | -9,279,129     | -1,147,630  | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | -558,434       | 12,713,940  | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | -28            | 16,694,987  | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | -3,666,678     | 0           | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | -28,087,874    | -21,844,736 | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | -1,083,580     | 45,664,176  | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | -1,033,157     | 7,548,229   | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | -1,867,257     | -406,081    | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | -1,265,005     | -454,047    | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | -1,078,198     | -594,857    | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       | -4,114,615     | -2,135,187  | 23.03 |
| 23.04                        | 02304 | PARAMED OCCUPATIONAL THERAPY         | -2,840,481     | -1,372,287  | 23.04 |

## RECLASSIFICATION AND ADJUSTMENTS OF TRIAL BALANCE OF EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | Adjustments<br>(See A-8)<br>6.00 | Net Expenses<br>For Allocation<br>7.00 |        |
|----------------------------------------|-------|----------------------------------------|----------------------------------|----------------------------------------|--------|
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | -7,000                           | 240,601                                | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | -3,375                           | 552,044                                | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | -1,807,813                       | -933,324                               | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | -752,242                         | -311,121                               | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | -21,000                          | 637,435                                | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | -726,564                         | 361                                    | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | -2,856,836                       | -1,478,702                             | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                  |                                        |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | -5,604                           | 63,852,606                             | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | -30,786                          | 16,934,397                             | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | -442,329                         | 19,080,339                             | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | -12,437                          | 5,780,277                              | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | -23,465                          | 11,970,492                             | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                | 4,489,057                              | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | -386                             | 4,444,418                              | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                | 3,295,759                              | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                  |                                        |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | -29,442                          | 24,173,669                             | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                | 5,352,452                              | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                | 5,905,856                              | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | -207,850                         | 4,605,554                              | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | -79,251                          | 19,178,848                             | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                | 8,523,896                              | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                | 3,603,129                              | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | -3,504,849                       | 52,559,676                             | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                | 1,608,721                              | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                | 0                                      | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | -26,760                          | 10,316,365                             | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | -234                             | 1,343                                  | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | -6,258                           | 9,320,826                              | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | -425                             | 4,499,792                              | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                | 3,363,442                              | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 34,931                           | 2,576,211                              | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | -395,336                         | 5,258,597                              | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                | 1,350,373                              | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                | 35,105,607                             | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                | 76,674,620                             | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | -362,626                         | 147,503,084                            | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                | 0                                      | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | -1,245                           | 3,286,065                              | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | -53,430                          | 2,945,913                              | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                  |                                        |        |
| 90.00                                  | 09000 | CLINIC                                 | -324,185                         | 64,725,217                             | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | -56,842                          | 12,332,543                             | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                | 0                                      | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                | 0                                      | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                | 0                                      | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                  |                                        |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                | 0                                      | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                | 0                                      | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                | 0                                      | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                  |                                        |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | -84,655                          | 5,945,790                              | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                | 0                                      | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | -121,324                         | 1,910,791                              | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                | 0                                      | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | -12,834                          | 280,123                                | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                | 0                                      | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                | 0                                      | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | -252,393,506                     | 1,414,064,258                          | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                  |                                        |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                | 3,185,320                              | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | -131,146                         | 9,578,735                              | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                | 1,981,312                              | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                                | 41,343,215                             | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                                | 33,234,153                             | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                                | 4,989,462                              | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                                | 248,927,875                            | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 608,421                          | 23,438,888                             | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                                | 55,946,307                             | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 0                                | 1,865,158                              | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 0                                | 35,194,471                             | 194.03 |
| 194.04                                 | 07954 | CON - GNE                              | 0                                | 187,131                                | 194.04 |
| 200.00                                 |       | TOTAL (SUM OF LINES 118 through 199)   | -251,916,231                     | 1,873,936,285                          | 200.00 |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet A-6  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Increases                     |                              |        |       |             |       |
|-------------------------------|------------------------------|--------|-------|-------------|-------|
| Cost Center                   | Line #                       | Salary | Other |             |       |
| 2.00                          | 3.00                         | 4.00   | 5.00  |             |       |
| A - AFFIL CORP FRINGES #45960 |                              |        |       |             |       |
| 1.00                          | EMPLOYEE BENEFITS DEPARTMENT | 4.00   | 0     | 191,377,167 | 1.00  |
| 2.00                          |                              | 0.00   | 0     | 0           | 2.00  |
| 3.00                          |                              | 0.00   | 0     | 0           | 3.00  |
| 4.00                          |                              | 0.00   | 0     | 0           | 4.00  |
| 5.00                          |                              | 0.00   | 0     | 0           | 5.00  |
| 6.00                          |                              | 0.00   | 0     | 0           | 6.00  |
| 7.00                          |                              | 0.00   | 0     | 0           | 7.00  |
| 8.00                          |                              | 0.00   | 0     | 0           | 8.00  |
| 9.00                          |                              | 0.00   | 0     | 0           | 9.00  |
| 10.00                         |                              | 0.00   | 0     | 0           | 10.00 |
| 11.00                         |                              | 0.00   | 0     | 0           | 11.00 |
| 12.00                         |                              | 0.00   | 0     | 0           | 12.00 |
| 13.00                         |                              | 0.00   | 0     | 0           | 13.00 |
| 14.00                         |                              | 0.00   | 0     | 0           | 14.00 |
| 15.00                         |                              | 0.00   | 0     | 0           | 15.00 |
| 16.00                         |                              | 0.00   | 0     | 0           | 16.00 |
| 17.00                         |                              | 0.00   | 0     | 0           | 17.00 |
| 18.00                         |                              | 0.00   | 0     | 0           | 18.00 |
| 19.00                         |                              | 0.00   | 0     | 0           | 19.00 |
| 20.00                         |                              | 0.00   | 0     | 0           | 20.00 |
| 21.00                         |                              | 0.00   | 0     | 0           | 21.00 |
| 22.00                         |                              | 0.00   | 0     | 0           | 22.00 |
| 23.00                         |                              | 0.00   | 0     | 0           | 23.00 |
| 24.00                         |                              | 0.00   | 0     | 0           | 24.00 |
| 25.00                         |                              | 0.00   | 0     | 0           | 25.00 |
| 26.00                         |                              | 0.00   | 0     | 0           | 26.00 |
| 27.00                         |                              | 0.00   | 0     | 0           | 27.00 |
| 28.00                         |                              | 0.00   | 0     | 0           | 28.00 |
| 29.00                         |                              | 0.00   | 0     | 0           | 29.00 |
| 30.00                         |                              | 0.00   | 0     | 0           | 30.00 |
| 31.00                         |                              | 0.00   | 0     | 0           | 31.00 |
| 32.00                         |                              | 0.00   | 0     | 0           | 32.00 |
| 33.00                         |                              | 0.00   | 0     | 0           | 33.00 |
| 34.00                         |                              | 0.00   | 0     | 0           | 34.00 |
| 35.00                         |                              | 0.00   | 0     | 0           | 35.00 |
| 36.00                         |                              | 0.00   | 0     | 0           | 36.00 |
| 37.00                         |                              | 0.00   | 0     | 0           | 37.00 |
| 38.00                         |                              | 0.00   | 0     | 0           | 38.00 |
| 39.00                         |                              | 0.00   | 0     | 0           | 39.00 |
| 40.00                         |                              | 0.00   | 0     | 0           | 40.00 |
| 41.00                         |                              | 0.00   | 0     | 0           | 41.00 |
| 42.00                         |                              | 0.00   | 0     | 0           | 42.00 |
| 43.00                         |                              | 0.00   | 0     | 0           | 43.00 |
| 44.00                         |                              | 0.00   | 0     | 0           | 44.00 |
| 45.00                         |                              | 0.00   | 0     | 0           | 45.00 |
| 46.00                         |                              | 0.00   | 0     | 0           | 46.00 |
| 47.00                         |                              | 0.00   | 0     | 0           | 47.00 |
| 48.00                         |                              | 0.00   | 0     | 0           | 48.00 |
| 49.00                         |                              | 0.00   | 0     | 0           | 49.00 |
| 50.00                         |                              | 0.00   | 0     | 0           | 50.00 |
| 51.00                         |                              | 0.00   | 0     | 0           | 51.00 |
| 52.00                         |                              | 0.00   | 0     | 0           | 52.00 |
| 53.00                         |                              | 0.00   | 0     | 0           | 53.00 |
| 54.00                         |                              | 0.00   | 0     | 0           | 54.00 |
| 55.00                         |                              | 0.00   | 0     | 0           | 55.00 |
| 56.00                         |                              | 0.00   | 0     | 0           | 56.00 |
| 57.00                         |                              | 0.00   | 0     | 0           | 57.00 |
| 58.00                         |                              | 0.00   | 0     | 0           | 58.00 |
| 59.00                         |                              | 0.00   | 0     | 0           | 59.00 |
| 60.00                         |                              | 0.00   | 0     | 0           | 60.00 |
| 61.00                         |                              | 0.00   | 0     | 0           | 61.00 |
| 62.00                         |                              | 0.00   | 0     | 0           | 62.00 |
| 63.00                         |                              | 0.00   | 0     | 0           | 63.00 |
| 64.00                         |                              | 0.00   | 0     | 0           | 64.00 |
| 65.00                         |                              | 0.00   | 0     | 0           | 65.00 |
| 66.00                         |                              | 0.00   | 0     | 0           | 66.00 |
| 68.00                         |                              | 0.00   | 0     | 0           | 68.00 |
| 69.00                         |                              | 0.00   | 0     | 0           | 69.00 |
| 70.00                         |                              | 0.00   | 0     | 0           | 70.00 |
| 71.00                         |                              | 0.00   | 0     | 0           | 71.00 |
| 72.00                         |                              | 0.00   | 0     | 0           | 72.00 |
| 73.00                         |                              | 0.00   | 0     | 0           | 73.00 |
| 74.00                         |                              | 0.00   | 0     | 0           | 74.00 |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

|                                | Increases                   |        |        |           |             |       |
|--------------------------------|-----------------------------|--------|--------|-----------|-------------|-------|
|                                | Cost Center                 | Line # | Salary | Other     |             |       |
|                                | 2.00                        | 3.00   | 4.00   | 5.00      |             |       |
| 75.00                          |                             | 0.00   | 0      | 0         |             | 75.00 |
| 76.00                          |                             | 0.00   | 0      | 0         |             | 76.00 |
| 77.00                          |                             | 0.00   | 0      | 0         |             | 77.00 |
| 78.00                          |                             | 0.00   | 0      | 0         |             | 78.00 |
| 79.00                          |                             | 0.00   | 0      | 0         |             | 79.00 |
| 80.00                          |                             | 0.00   | 0      | 0         |             | 80.00 |
| 81.00                          |                             | 0.00   | 0      | 0         |             | 81.00 |
| 82.00                          |                             | 0.00   | 0      | 0         |             | 82.00 |
| 83.00                          |                             | 0.00   | 0      | 0         |             | 83.00 |
| TOTALS                         |                             |        |        |           | 191,377,167 |       |
| B - PARKING GARAGE RECH #49490 |                             |        |        |           |             |       |
| 1.00                           | PARKING GARAGE              | 5.02   | 0      | 973,966   |             | 1.00  |
| 2.00                           |                             | 0.00   | 0      | 0         |             | 2.00  |
| 3.00                           |                             | 0.00   | 0      | 0         |             | 3.00  |
| 4.00                           |                             | 0.00   | 0      | 0         |             | 4.00  |
| 5.00                           |                             | 0.00   | 0      | 0         |             | 5.00  |
| 6.00                           |                             | 0.00   | 0      | 0         |             | 6.00  |
| 7.00                           |                             | 0.00   | 0      | 0         |             | 7.00  |
| 8.00                           |                             | 0.00   | 0      | 0         |             | 8.00  |
| 9.00                           |                             | 0.00   | 0      | 0         |             | 9.00  |
| 10.00                          |                             | 0.00   | 0      | 0         |             | 10.00 |
| 11.00                          |                             | 0.00   | 0      | 0         |             | 11.00 |
| 12.00                          |                             | 0.00   | 0      | 0         |             | 12.00 |
| 13.00                          |                             | 0.00   | 0      | 0         |             | 13.00 |
| 14.00                          |                             | 0.00   | 0      | 0         |             | 14.00 |
| 15.00                          |                             | 0.00   | 0      | 0         |             | 15.00 |
| 16.00                          |                             | 0.00   | 0      | 0         |             | 16.00 |
| 17.00                          |                             | 0.00   | 0      | 0         |             | 17.00 |
| 18.00                          |                             | 0.00   | 0      | 0         |             | 18.00 |
| 20.00                          |                             | 0.00   | 0      | 0         |             | 20.00 |
| 21.00                          |                             | 0.00   | 0      | 0         |             | 21.00 |
| 22.00                          |                             | 0.00   | 0      | 0         |             | 22.00 |
| 23.00                          |                             | 0.00   | 0      | 0         |             | 23.00 |
| 24.00                          |                             | 0.00   | 0      | 0         |             | 24.00 |
| 25.00                          |                             | 0.00   | 0      | 0         |             | 25.00 |
| 26.00                          |                             | 0.00   | 0      | 0         |             | 26.00 |
| 27.00                          |                             | 0.00   | 0      | 0         |             | 27.00 |
| 28.00                          |                             | 0.00   | 0      | 0         |             | 28.00 |
| 29.00                          |                             | 0.00   | 0      | 0         |             | 29.00 |
| 31.00                          |                             | 0.00   | 0      | 0         |             | 31.00 |
| 32.00                          |                             | 0.00   | 0      | 0         |             | 32.00 |
| 34.00                          |                             | 0.00   | 0      | 0         |             | 34.00 |
| 35.00                          |                             | 0.00   | 0      | 0         |             | 35.00 |
| 37.00                          |                             | 0.00   | 0      | 0         |             | 37.00 |
| 38.00                          |                             | 0.00   | 0      | 0         |             | 38.00 |
| 39.00                          |                             | 0.00   | 0      | 0         |             | 39.00 |
| 40.00                          |                             | 0.00   | 0      | 0         |             | 40.00 |
| 41.00                          |                             | 0.00   | 0      | 0         |             | 41.00 |
| 42.00                          |                             | 0.00   | 0      | 0         |             | 42.00 |
| 43.00                          |                             | 0.00   | 0      | 0         |             | 43.00 |
| 44.00                          |                             | 0.00   | 0      | 0         |             | 44.00 |
| 45.00                          |                             | 0.00   | 0      | 0         |             | 45.00 |
| 46.00                          |                             | 0.00   | 0      | 0         |             | 46.00 |
| 47.00                          |                             | 0.00   | 0      | 0         |             | 47.00 |
| 49.00                          |                             | 0.00   | 0      | 0         |             | 49.00 |
| 50.00                          |                             | 0.00   | 0      | 0         |             | 50.00 |
| 51.00                          |                             | 0.00   | 0      | 0         |             | 51.00 |
| 52.00                          |                             | 0.00   | 0      | 0         |             | 52.00 |
| 53.00                          |                             | 0.00   | 0      | 0         |             | 53.00 |
| 54.00                          |                             | 0.00   | 0      | 0         |             | 54.00 |
| 55.00                          |                             | 0.00   | 0      | 0         |             | 55.00 |
| 56.00                          |                             | 0.00   | 0      | 0         |             | 56.00 |
| TOTALS                         |                             |        |        |           | 973,966     |       |
| C - REAL ESTATE TAX            |                             |        |        |           |             |       |
| 1.00                           | PHYSICIANS' PRIVATE OFFICES | 192.00 | 0      | 1,716,972 |             | 1.00  |
| TOTALS                         |                             |        |        |           | 1,716,972   |       |
| D - PROPERTY INSURANCE         |                             |        |        |           |             |       |
| 1.00                           | DEPRECIATION EQUIPMENT      | 1.13   | 0      | 2,842,543 |             | 1.00  |
| 2.00                           |                             | 0.00   | 0      | 0         |             | 2.00  |
| 3.00                           |                             | 0.00   | 0      | 0         |             | 3.00  |
| 4.00                           |                             | 0.00   | 0      | 0         |             | 4.00  |
| 5.00                           |                             | 0.00   | 0      | 0         |             | 5.00  |
| 6.00                           |                             | 0.00   | 0      | 0         |             | 6.00  |
| 7.00                           |                             | 0.00   | 0      | 0         |             | 7.00  |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

| Increases             |                                      |        |        |             |       |
|-----------------------|--------------------------------------|--------|--------|-------------|-------|
|                       | Cost Center                          | Line # | Salary | Other       |       |
|                       | 2.00                                 | 3.00   | 4.00   | 5.00        |       |
| 8.00                  |                                      | 0.00   | 0      | 0           | 8.00  |
| 9.00                  |                                      | 0.00   | 0      | 0           | 9.00  |
|                       | TOTALS                               |        | 0      | 2,842,543   |       |
| E - CENTRAL SUPPLY    |                                      |        |        |             |       |
| 1.00                  | MEDICAL SUPPLIES CHARGED TO PATIENTS | 71.00  | 0      | 317,474     | 1.00  |
|                       | TOTALS                               |        | 0      | 317,474     |       |
| F - PHARMACY          |                                      |        |        |             |       |
| 1.00                  | DRUGS CHARGED TO PATIENTS            | 73.00  | 0      | 148,003,187 | 1.00  |
|                       | TOTALS                               |        | 0      | 148,003,187 |       |
| G - SPACE RECH #49940 |                                      |        |        |             |       |
| 1.00                  | DEPRECIATION OLD HOSPITAL            | 1.01   | 0      | 136,697,944 | 1.00  |
| 2.00                  |                                      | 0.00   | 0      | 0           | 2.00  |
| 3.00                  |                                      | 0.00   | 0      | 0           | 3.00  |
| 4.00                  |                                      | 0.00   | 0      | 0           | 4.00  |
| 5.00                  |                                      | 0.00   | 0      | 0           | 5.00  |
| 6.00                  |                                      | 0.00   | 0      | 0           | 6.00  |
| 7.00                  |                                      | 0.00   | 0      | 0           | 7.00  |
| 8.00                  |                                      | 0.00   | 0      | 0           | 8.00  |
| 9.00                  |                                      | 0.00   | 0      | 0           | 9.00  |
| 10.00                 |                                      | 0.00   | 0      | 0           | 10.00 |
| 11.00                 |                                      | 0.00   | 0      | 0           | 11.00 |
| 12.00                 |                                      | 0.00   | 0      | 0           | 12.00 |
| 13.00                 |                                      | 0.00   | 0      | 0           | 13.00 |
| 14.00                 |                                      | 0.00   | 0      | 0           | 14.00 |
| 15.00                 |                                      | 0.00   | 0      | 0           | 15.00 |
| 16.00                 |                                      | 0.00   | 0      | 0           | 16.00 |
| 17.00                 |                                      | 0.00   | 0      | 0           | 17.00 |
| 18.00                 |                                      | 0.00   | 0      | 0           | 18.00 |
| 19.00                 |                                      | 0.00   | 0      | 0           | 19.00 |
| 20.00                 |                                      | 0.00   | 0      | 0           | 20.00 |
| 22.00                 |                                      | 0.00   | 0      | 0           | 22.00 |
| 23.00                 |                                      | 0.00   | 0      | 0           | 23.00 |
| 24.00                 |                                      | 0.00   | 0      | 0           | 24.00 |
| 25.00                 |                                      | 0.00   | 0      | 0           | 25.00 |
| 26.00                 |                                      | 0.00   | 0      | 0           | 26.00 |
| 27.00                 |                                      | 0.00   | 0      | 0           | 27.00 |
| 28.00                 |                                      | 0.00   | 0      | 0           | 28.00 |
| 29.00                 |                                      | 0.00   | 0      | 0           | 29.00 |
| 30.00                 |                                      | 0.00   | 0      | 0           | 30.00 |
| 31.00                 |                                      | 0.00   | 0      | 0           | 31.00 |
| 32.00                 |                                      | 0.00   | 0      | 0           | 32.00 |
| 33.00                 |                                      | 0.00   | 0      | 0           | 33.00 |
| 34.00                 |                                      | 0.00   | 0      | 0           | 34.00 |
| 35.00                 |                                      | 0.00   | 0      | 0           | 35.00 |
| 36.00                 |                                      | 0.00   | 0      | 0           | 36.00 |
| 37.00                 |                                      | 0.00   | 0      | 0           | 37.00 |
| 38.00                 |                                      | 0.00   | 0      | 0           | 38.00 |
| 39.00                 |                                      | 0.00   | 0      | 0           | 39.00 |
| 40.00                 |                                      | 0.00   | 0      | 0           | 40.00 |
| 41.00                 |                                      | 0.00   | 0      | 0           | 41.00 |
| 42.00                 |                                      | 0.00   | 0      | 0           | 42.00 |
| 43.00                 |                                      | 0.00   | 0      | 0           | 43.00 |
| 44.00                 |                                      | 0.00   | 0      | 0           | 44.00 |
| 45.00                 |                                      | 0.00   | 0      | 0           | 45.00 |
| 46.00                 |                                      | 0.00   | 0      | 0           | 46.00 |
| 47.00                 |                                      | 0.00   | 0      | 0           | 47.00 |
| 48.00                 |                                      | 0.00   | 0      | 0           | 48.00 |
| 49.00                 |                                      | 0.00   | 0      | 0           | 49.00 |
| 50.00                 |                                      | 0.00   | 0      | 0           | 50.00 |
| 51.00                 |                                      | 0.00   | 0      | 0           | 51.00 |
| 52.00                 |                                      | 0.00   | 0      | 0           | 52.00 |
| 53.00                 |                                      | 0.00   | 0      | 0           | 53.00 |
| 54.00                 |                                      | 0.00   | 0      | 0           | 54.00 |
| 55.00                 |                                      | 0.00   | 0      | 0           | 55.00 |
| 56.00                 |                                      | 0.00   | 0      | 0           | 56.00 |
| 57.00                 |                                      | 0.00   | 0      | 0           | 57.00 |
| 58.00                 |                                      | 0.00   | 0      | 0           | 58.00 |
| 59.00                 |                                      | 0.00   | 0      | 0           | 59.00 |
| 60.00                 |                                      | 0.00   | 0      | 0           | 60.00 |
| 61.00                 |                                      | 0.00   | 0      | 0           | 61.00 |
| 62.00                 |                                      | 0.00   | 0      | 0           | 62.00 |
| 64.00                 |                                      | 0.00   | 0      | 0           | 64.00 |
| 65.00                 |                                      | 0.00   | 0      | 0           | 65.00 |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

|                          | Increases                           |        |            |            |             |            |
|--------------------------|-------------------------------------|--------|------------|------------|-------------|------------|
|                          | Cost Center                         | Line # | Salary     | Other      |             |            |
|                          | 2.00                                | 3.00   | 4.00       | 5.00       |             |            |
| 66.00                    |                                     | 0.00   | 0          | 0          |             | 66.00      |
| 67.00                    |                                     | 0.00   | 0          | 0          |             | 67.00      |
| 68.00                    |                                     | 0.00   | 0          | 0          |             | 68.00      |
| 69.00                    |                                     | 0.00   | 0          | 0          |             | 69.00      |
| 70.00                    |                                     | 0.00   | 0          | 0          |             | 70.00      |
| 71.00                    |                                     | 0.00   | 0          | 0          |             | 71.00      |
| 72.00                    |                                     | 0.00   | 0          | 0          |             | 72.00      |
| 73.00                    |                                     | 0.00   | 0          | 0          |             | 73.00      |
| 74.00                    |                                     | 0.00   | 0          | 0          |             | 74.00      |
| 75.00                    |                                     | 0.00   | 0          | 0          |             | 75.00      |
| 76.00                    |                                     | 0.00   | 0          | 0          |             | 76.00      |
| 77.00                    |                                     | 0.00   | 0          | 0          |             | 77.00      |
| 78.00                    |                                     | 0.00   | 0          | 0          |             | 78.00      |
| 79.00                    |                                     | 0.00   | 0          | 0          |             | 79.00      |
| TOTALS                   |                                     |        |            |            | 136,697,944 |            |
| H - AFFIL CORP OH #45969 |                                     |        |            |            |             |            |
| 1.00                     | CORPORATE ADMINISTRATION            | 5.11   | 0          | 74,378,384 |             | 1.00       |
| 2.00                     | RUSH UNIVERSITY ADMIN SPLIT         | 18.14  | 0          | 18,331,161 |             | 2.00       |
| 3.00                     |                                     | 0.00   | 0          | 0          |             | 3.00       |
| 4.00                     |                                     | 0.00   | 0          | 0          |             | 4.00       |
| 5.00                     |                                     | 0.00   | 0          | 0          |             | 5.00       |
| 6.00                     |                                     | 0.00   | 0          | 0          |             | 6.00       |
| 7.00                     |                                     | 0.00   | 0          | 0          |             | 7.00       |
| 8.00                     |                                     | 0.00   | 0          | 0          |             | 8.00       |
| 9.00                     |                                     | 0.00   | 0          | 0          |             | 9.00       |
| TOTALS                   |                                     |        |            |            | 92,709,545  |            |
| I - NURSE ANESTH         |                                     |        |            |            |             |            |
| 1.00                     | NONPHYSICIAN ANESTHETISTS           | 19.00  | 3,666,678  | 0          |             | 1.00       |
| TOTALS                   |                                     |        |            |            | 3,666,678   | 0          |
| J - DATA CENTER          |                                     |        |            |            |             |            |
| 1.00                     | ADMIN & GEN PT SERVICE              | 5.07   | 16,357,355 | 37,259,459 |             | 1.00       |
| TOTALS                   |                                     |        |            |            | 16,357,355  | 37,259,459 |
| K - PASTORAL CARE        |                                     |        |            |            |             |            |
| 1.00                     | PARAMED PASTORAL CARE               | 23.06  | 540,127    | 47,151     |             | 1.00       |
| 2.00                     | GIFT, FLOWER, COFFEE SHOP & CANTEEN | 190.00 | 140,650    | 31,859     |             | 2.00       |
| 3.00                     |                                     | 0.00   | 0          | 0          |             | 3.00       |
| TOTALS                   |                                     |        |            |            | 680,777     | 79,010     |
| L - MALPRACTICE          |                                     |        |            |            |             |            |
| 1.00                     | CORPORATE ADMINISTRATION            | 5.11   | 0          | 20,769,318 |             | 1.00       |
| TOTALS                   |                                     |        |            |            | 0           | 20,769,318 |
| M - DEPRECIATION         |                                     |        |            |            |             |            |
| 1.00                     | DEPRECIATION OLD HOSPITAL           | 1.01   | 0          | 977,908    |             | 1.00       |
| 2.00                     | DEPRECIATION DIRECT BLDG            | 1.02   | 0          | 6,340,891  |             | 2.00       |
| 3.00                     | DEPRECIATION KELLOGG PAV            | 1.03   | 0          | 4,495,464  |             | 3.00       |
| 4.00                     | DEPRECIATION JELKE SOUTH            | 1.04   | 0          | 5,292,639  |             | 4.00       |
| 5.00                     | DEPRECIATION ATRIUM PAV             | 1.05   | 0          | 7,329,342  |             | 5.00       |
| 6.00                     | DEPRECIATION PRO BLDG NORTH         | 1.06   | 0          | 1,199,260  |             | 6.00       |
| 7.00                     | DEPRECIATION PRO BLDG SOUTH         | 1.07   | 0          | 769,948    |             | 7.00       |
| 8.00                     | DEPRECIATION WOOD ST                | 1.08   | 0          | 342,430    |             | 8.00       |
| 9.00                     | DEPRECIATION ACADEMIC FACILITY      | 1.09   | 0          | 739,326    |             | 9.00       |
| 10.00                    | DEPRECIATION PRO BLDG III           | 1.10   | 0          | 1,542,728  |             | 10.00      |
| 11.00                    | DEPRECIATION JRB                    | 1.11   | 0          | 429,068    |             | 11.00      |
| 12.00                    |                                     | 0.00   | 0          | 0          |             | 12.00      |
| 13.00                    | DEPRECIATION EQUIPMENT              | 1.13   | 0          | 47,187,413 |             | 13.00      |
| 14.00                    | DEPRECIATION ORTHOPEDICS            | 1.14   | 0          | 551,534    |             | 14.00      |
| 15.00                    | DEPRECIATION KIDSTON                | 1.15   | 0          | 15,795     |             | 15.00      |
| 16.00                    | DEPRECIATION COHN                   | 1.16   | 0          | 1,410,031  |             | 16.00      |
| 17.00                    | DEPRECIATION TOWER                  | 1.17   | 0          | 17,963,184 |             | 17.00      |
| TOTALS                   |                                     |        |            |            | 0           | 96,586,961 |
| N - INTEREST             |                                     |        |            |            |             |            |
| 1.00                     | INTEREST GENERAL                    | 2.01   | 0          | 2,175,108  |             | 1.00       |
| 2.00                     | INTEREST DIRECT BLDG                | 2.02   | 0          | 1,814,631  |             | 2.00       |
| 3.00                     | INTEREST ATRUM PAV                  | 2.03   | 0          | 2,822,386  |             | 3.00       |
| 4.00                     | INTEREST PRO BLDG SOUTH             | 2.04   | 0          | 343,813    |             | 4.00       |
| 5.00                     | INTEREST TOB                        | 2.05   | 0          | 599,566    |             | 5.00       |
| 6.00                     | INTEREST PRO BLDG III               | 2.06   | 0          | 16,073     |             | 6.00       |
| 7.00                     | INTEREST TOWER                      | 2.07   | 0          | 8,684,970  |             | 7.00       |
| 8.00                     | INTEREST PRO BLDG NORTH             | 2.08   | 0          | 103,422    |             | 8.00       |
| TOTALS                   |                                     |        |            |            | 0           | 16,559,969 |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

|       | Increases                            |        |           |           |  |       |
|-------|--------------------------------------|--------|-----------|-----------|--|-------|
|       | Cost Center                          | Line # | Salary    | Other     |  |       |
|       | 2.00                                 | 3.00   | 4.00      | 5.00      |  |       |
|       | O - NURSING SALARY                   |        |           |           |  |       |
| 1.00  | NURSERY                              | 43.00  | 1,825,095 | 1,470,664 |  | 1.00  |
|       | TOTALS                               |        | 1,825,095 | 1,470,664 |  |       |
|       | P - PHYSICS RESIDENTS                |        |           |           |  |       |
| 1.00  | PARAMED MEDICAL PHYSICS              | 23.05  | 256,385   | 0         |  | 1.00  |
| 2.00  |                                      | 0.00   | 0         | 0         |  | 2.00  |
|       | TOTALS                               |        | 256,385   | 0         |  |       |
|       | Q - DIRECT EDUCATION                 |        |           |           |  |       |
| 1.00  | I&R SERVICES-SALARY & FRINGES APPRVD | 21.00  | 1,870,241 | 0         |  | 1.00  |
| 2.00  |                                      | 0.00   | 0         | 0         |  | 2.00  |
| 3.00  |                                      | 0.00   | 0         | 0         |  | 3.00  |
| 4.00  |                                      | 0.00   | 0         | 0         |  | 4.00  |
| 5.00  |                                      | 0.00   | 0         | 0         |  | 5.00  |
| 6.00  |                                      | 0.00   | 0         | 0         |  | 6.00  |
| 7.00  |                                      | 0.00   | 0         | 0         |  | 7.00  |
| 8.00  |                                      | 0.00   | 0         | 0         |  | 8.00  |
| 9.00  |                                      | 0.00   | 0         | 0         |  | 9.00  |
| 10.00 |                                      | 0.00   | 0         | 0         |  | 10.00 |
| 11.00 |                                      | 0.00   | 0         | 0         |  | 11.00 |
| 12.00 |                                      | 0.00   | 0         | 0         |  | 12.00 |
| 13.00 |                                      | 0.00   | 0         | 0         |  | 13.00 |
| 14.00 |                                      | 0.00   | 0         | 0         |  | 14.00 |
| 15.00 |                                      | 0.00   | 0         | 0         |  | 15.00 |
| 16.00 |                                      | 0.00   | 0         | 0         |  | 16.00 |
| 17.00 |                                      | 0.00   | 0         | 0         |  | 17.00 |
|       | TOTALS                               |        | 1,870,241 | 0         |  |       |
|       | R - NON-RESEARCH                     |        |           |           |  |       |
| 1.00  | RESEARCH ADMINISTRATION              | 5.03   | 66,236    | 6,944     |  | 1.00  |
| 2.00  | ADMIN & GEN PT SERVICE               | 5.07   | 144,474   | 55,615    |  | 2.00  |
| 3.00  | RESEARCH FACULTY                     | 5.09   | 160,847   | 27,674    |  | 3.00  |
| 4.00  | CORPORATE ADMINISTRATION             | 5.11   | 0         | 68,538    |  | 4.00  |
| 5.00  | CLINICAL LAB ADMIN PED               | 18.01  | 101,915   | 11,180    |  | 5.00  |
| 6.00  | CLINICAL LAB ADMIN OB                | 18.02  | 147,684   | 7,063     |  | 6.00  |
| 7.00  | CLINICAL LAB ADMIN SURG              | 18.03  | 110,557   | 794,219   |  | 7.00  |
| 8.00  | CLINICAL LAB ADMIN PSYCH             | 18.04  | 160,397   | 0         |  | 8.00  |
| 9.00  | CLINICAL LAB ADMIN PATH              | 18.05  | 42,598    | 21,757    |  | 9.00  |
| 10.00 | CLINICAL LAB ADMIN CARD              | 18.06  | 90,700    | 80,526    |  | 10.00 |
| 11.00 | CLINICAL LAB ADMIN NEUR              | 18.08  | 536,141   | 13,977    |  | 11.00 |
| 12.00 | DISCRETIONARY OPERATIONS             | 18.12  | 1,958,060 | 6,514,903 |  | 12.00 |
| 13.00 | RUSH UNIVERSITY ADMIN SPLIT          | 18.14  | 468,592   | 0         |  | 13.00 |
| 14.00 | NURSING SCHOOL SPLIT                 | 18.16  | 440,328   | 0         |  | 14.00 |
| 15.00 | I&R SERVICES-SALARY & FRINGES APPRVD | 21.00  | 387,653   | 85,266    |  | 15.00 |
| 16.00 | PARAMED HEALTH SYSTEM MANAGEMENT     | 23.00  | 2,500     | 0         |  | 16.00 |
| 17.00 | ANESTHESIOLOGY                       | 53.00  | 0         | 204,392   |  | 17.00 |
| 18.00 | LABORATORY                           | 60.00  | 523,089   | 192,161   |  | 18.00 |
| 19.00 | ELECTROCARDIOLOGY                    | 69.00  | 211,696   | 98,209    |  | 19.00 |
| 20.00 | PSYCH DAY HOSPITAL                   | 76.01  | 22,867    | 0         |  | 20.00 |
| 21.00 | EMERGENCY                            | 91.00  | 0         | 19,102    |  | 21.00 |
| 22.00 | FUND RAISING                         | 190.01 | 55,641    | 63,264    |  | 22.00 |
| 23.00 |                                      | 0.00   | 0         | 0         |  | 23.00 |
|       | TOTALS                               |        | 5,631,975 | 8,264,790 |  |       |
|       | S - HSM TEACHING                     |        |           |           |  |       |
| 1.00  | PARAMED HEALTH SYSTEM MANAGEMENT     | 23.00  | 1,498,823 | 0         |  | 1.00  |
| 2.00  |                                      | 0.00   | 0         | 0         |  | 2.00  |
| 3.00  |                                      | 0.00   | 0         | 0         |  | 3.00  |
| 4.00  |                                      | 0.00   | 0         | 0         |  | 4.00  |
| 5.00  |                                      | 0.00   | 0         | 0         |  | 5.00  |
| 6.00  |                                      | 0.00   | 0         | 0         |  | 6.00  |
| 7.00  |                                      | 0.00   | 0         | 0         |  | 7.00  |
| 8.00  |                                      | 0.00   | 0         | 0         |  | 8.00  |
| 9.00  |                                      | 0.00   | 0         | 0         |  | 9.00  |
| 10.00 |                                      | 0.00   | 0         | 0         |  | 10.00 |
| 11.00 |                                      | 0.00   | 0         | 0         |  | 11.00 |
| 12.00 |                                      | 0.00   | 0         | 0         |  | 12.00 |
| 13.00 |                                      | 0.00   | 0         | 0         |  | 13.00 |
| 14.00 |                                      | 0.00   | 0         | 0         |  | 14.00 |
| 15.00 |                                      | 0.00   | 0         | 0         |  | 15.00 |
| 16.00 |                                      | 0.00   | 0         | 0         |  | 16.00 |
| 17.00 |                                      | 0.00   | 0         | 0         |  | 17.00 |
| 18.00 |                                      | 0.00   | 0         | 0         |  | 18.00 |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

| Increases                            |                                      |        |           |             |       |
|--------------------------------------|--------------------------------------|--------|-----------|-------------|-------|
|                                      | Cost Center                          | Line # | Salary    | Other       |       |
|                                      | 2.00                                 | 3.00   | 4.00      | 5.00        |       |
| 19.00                                |                                      | 0.00   | 0         | 0           | 19.00 |
| 20.00                                |                                      | 0.00   | 0         | 0           | 20.00 |
| 21.00                                |                                      | 0.00   | 0         | 0           | 21.00 |
| 22.00                                |                                      | 0.00   | 0         | 0           | 22.00 |
| 23.00                                |                                      | 0.00   | 0         | 0           | 23.00 |
| 24.00                                |                                      | 0.00   | 0         | 0           | 24.00 |
| 25.00                                |                                      | 0.00   | 0         | 0           | 25.00 |
|                                      | TOTALS                               |        | 1,498,823 | 0           |       |
| T - TUITION ASSISTANCE               |                                      |        |           |             |       |
| 1.00                                 | NURSING SCHOOL                       | 20.00  | 0         | 6,243,138   | 1.00  |
| 2.00                                 | GIFT, FLOWER, COFFEE SHOP & CANTEEN  | 190.00 | 0         | 704,369     | 2.00  |
|                                      | TOTALS                               |        | 0         | 6,947,507   |       |
| U - ACCREATION                       |                                      |        |           |             |       |
| 1.00                                 | DEPRECIATION OLD HOSPITAL            | 1.01   | 0         | 38,591      | 1.00  |
| 2.00                                 | DEPRECIATION DIRECT BLDG             | 1.02   | 0         | 3,029       | 2.00  |
| 3.00                                 | DEPRECIATION KELLOGG PAV             | 1.03   | 0         | 200,739     | 3.00  |
| 4.00                                 | DEPRECIATION JELKE SOUTH             | 1.04   | 0         | 204,079     | 4.00  |
| 5.00                                 | DEPRECIATION ATRIUM PAV              | 1.05   | 0         | 148,474     | 5.00  |
| 6.00                                 | DEPRECIATION PRO BLDG NORTH          | 1.06   | 0         | 136,326     | 6.00  |
| 7.00                                 | DEPRECIATION PRO BLDG SOUTH          | 1.07   | 0         | 96,879      | 7.00  |
| 8.00                                 | DEPRECIATION WOOD ST                 | 1.08   | 0         | 3,783       | 8.00  |
| 9.00                                 | DEPRECIATION ACADEMIC FACILITY       | 1.09   | 0         | 65,096      | 9.00  |
| 10.00                                | DEPRECIATION PRO BLDG III            | 1.10   | 0         | 63,559      | 10.00 |
| 11.00                                | DEPRECIATION JRB                     | 1.11   | 0         | 47,252      | 11.00 |
| 12.00                                | DEPRECIATION KIDSTON                 | 1.15   | 0         | 15,352      | 12.00 |
| 13.00                                | DEPRECIATION COHN                    | 1.16   | 0         | 630         | 13.00 |
| 14.00                                | DEPRECIATION TOWER                   | 1.17   | 0         | 8,300       | 14.00 |
| 15.00                                |                                      | 0.00   | 0         | 0           | 15.00 |
|                                      | TOTALS                               |        | 0         | 1,032,089   |       |
| V - MED SUPPLY & IMPLANT DIRECT COST |                                      |        |           |             |       |
| 1.00                                 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 71.00  | 0         | 34,788,133  | 1.00  |
| 2.00                                 | IMPL. DEV. CHARGED TO PATIENTS       | 72.00  | 0         | 76,674,620  | 2.00  |
| 3.00                                 |                                      | 0.00   | 0         | 0           | 3.00  |
| 5.00                                 |                                      | 0.00   | 0         | 0           | 5.00  |
| 6.00                                 |                                      | 0.00   | 0         | 0           | 6.00  |
| 7.00                                 |                                      | 0.00   | 0         | 0           | 7.00  |
| 8.00                                 |                                      | 0.00   | 0         | 0           | 8.00  |
| 9.00                                 |                                      | 0.00   | 0         | 0           | 9.00  |
| 10.00                                |                                      | 0.00   | 0         | 0           | 10.00 |
| 11.00                                |                                      | 0.00   | 0         | 0           | 11.00 |
| 12.00                                |                                      | 0.00   | 0         | 0           | 12.00 |
| 14.00                                |                                      | 0.00   | 0         | 0           | 14.00 |
| 15.00                                |                                      | 0.00   | 0         | 0           | 15.00 |
| 16.00                                |                                      | 0.00   | 0         | 0           | 16.00 |
| 17.00                                |                                      | 0.00   | 0         | 0           | 17.00 |
| 18.00                                |                                      | 0.00   | 0         | 0           | 18.00 |
| 19.00                                |                                      | 0.00   | 0         | 0           | 19.00 |
| 20.00                                |                                      | 0.00   | 0         | 0           | 20.00 |
| 21.00                                |                                      | 0.00   | 0         | 0           | 21.00 |
| 22.00                                |                                      | 0.00   | 0         | 0           | 22.00 |
| 23.00                                |                                      | 0.00   | 0         | 0           | 23.00 |
| 24.00                                |                                      | 0.00   | 0         | 0           | 24.00 |
| 25.00                                |                                      | 0.00   | 0         | 0           | 25.00 |
|                                      | TOTALS                               |        | 0         | 111,462,753 |       |
| W - PHARMACY RESIDENTS               |                                      |        |           |             |       |
| 1.00                                 | PARAMED PHARMACY                     | 23.09  | 632,998   | 25,437      | 1.00  |
|                                      | TOTALS                               |        | 632,998   | 25,437      |       |
| X - DEANS OFFICE                     |                                      |        |           |             |       |
| 1.00                                 | PARAMED HEALTH SYSTEM MANAGEMENT     | 23.00  | 0         | 278,578     | 1.00  |
| 2.00                                 | PARAMED MEDICAL PERFUSION TECH       | 23.01  | 0         | 202,680     | 2.00  |
| 3.00                                 | PARAMED DIETARY                      | 23.02  | 0         | 136,293     | 3.00  |
| 4.00                                 | PARAMED TECHNOLOGY                   | 23.07  | 0         | 281,901     | 4.00  |
| 5.00                                 | PARAMED SPEECH                       | 23.03  | 0         | 601,367     | 5.00  |
| 6.00                                 | PARAMED OCCUPATIONAL THERAPY         | 23.04  | 0         | 392,126     | 6.00  |
| 7.00                                 | GIFT, FLOWER, COFFEE SHOP & CANTEEN  | 190.00 | 0         | 30,289      | 7.00  |
| 8.00                                 | PARAMED VASCULAR ULTRASOUND          | 23.08  | 0         | 137,409     | 8.00  |
| 9.00                                 | PARAMED PHYSICIANS ASSISTANT         | 23.11  | 0         | 355,831     | 9.00  |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

| Increases |                             |        |            |             |  |        |
|-----------|-----------------------------|--------|------------|-------------|--|--------|
|           | Cost Center                 | Line # | Salary     | Other       |  |        |
|           | 2.00                        | 3.00   | 4.00       | 5.00        |  |        |
| 10.00     | PARAMED RESPIRATORY THERAPY | 23.10  | 0          | 226,648     |  | 10.00  |
| 11.00     | MEDICAL COLLEGE             | 194.00 | 0          | 152,531     |  | 11.00  |
| 12.00     | MEDICAL COLLEGE             | 194.00 | 0          | 45,882      |  | 12.00  |
| 13.00     | MEDICAL COLLEGE             | 194.00 | 0          | 149         |  | 13.00  |
| 14.00     | MEDICAL COLLEGE             | 194.00 | 0          | 1,372       |  | 14.00  |
| 15.00     | MEDICAL COLLEGE             | 194.00 | 0          | 215,424     |  | 15.00  |
|           | TOTALS                      |        | 0          | 3,058,480   |  |        |
| 500.00    | Grand Total: Increases      |        | 32,420,327 | 878,155,235 |  | 500.00 |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

|       | Decreases                            |        |        |            |                |  |       |
|-------|--------------------------------------|--------|--------|------------|----------------|--|-------|
|       | Cost Center                          | Line # | Salary | Other      | Wkst. A-7 Ref. |  |       |
|       | 6.00                                 | 7.00   | 8.00   | 9.00       | 10.00          |  |       |
|       | A - AFFIL CORP FRINGES #45960        |        |        |            |                |  |       |
| 1.00  | EMPLOYEE BENEFITS DEPARTMENT         | 4.00   | 0      | 1,513,755  | 0              |  | 1.00  |
| 2.00  | RESEARCH ADMINISTRATION              | 5.03   | 0      | 1,174,798  | 0              |  | 2.00  |
| 3.00  | ADMIN & GEN INPT SERVICE             | 5.04   | 0      | 868,720    | 0              |  | 3.00  |
| 4.00  | ADMIN & GEN OUTPT SERVICE            | 5.05   | 0      | 798,095    | 0              |  | 4.00  |
| 5.00  | ADMIN & GEN ANIMAL LAB               | 5.06   | 0      | 362,054    | 0              |  | 5.00  |
| 6.00  | ADMIN & GEN PT SERVICE               | 5.07   | 0      | 4,800,779  | 0              |  | 6.00  |
| 7.00  | PERSONNEL DEPARTMENT                 | 5.08   | 0      | 755,597    | 0              |  | 7.00  |
| 8.00  | RESEARCH FACULTY                     | 5.09   | 0      | 2,705,425  | 0              |  | 8.00  |
| 9.00  | RESEARCH SPA                         | 5.10   | 0      | 1,492,141  | 0              |  | 9.00  |
| 10.00 | CORPORATE ADMINISTRATION             | 5.11   | 0      | 20,828,550 | 0              |  | 10.00 |
| 11.00 | MAINTENANCE & REPAIRS                | 6.00   | 0      | 1,917,197  | 0              |  | 11.00 |
| 12.00 | LAUNDRY & LINEN SERVICE              | 8.00   | 0      | 184,831    | 0              |  | 12.00 |
| 13.00 | HOUSEKEEPING                         | 9.00   | 0      | 4,547,227  | 0              |  | 13.00 |
| 14.00 | DIETARY                              | 10.00  | 0      | 89,829     | 0              |  | 14.00 |
| 15.00 | PATIENT FOOD SERVICE                 | 10.01  | 0      | 1,576,869  | 0              |  | 15.00 |
| 16.00 | CAFETERIA                            | 11.00  | 0      | 354,128    | 0              |  | 16.00 |
| 17.00 | NURSING ADMINISTRATION               | 13.00  | 0      | 2,617,894  | 0              |  | 17.00 |
| 18.00 | PHARMACY                             | 15.00  | 0      | 3,050,890  | 0              |  | 18.00 |
| 19.00 | MEDICAL RECORDS & LIBRARY            | 16.00  | 0      | 1,186,761  | 0              |  | 19.00 |
| 20.00 | MEDICAL RECORDS & LIBRARY            | 16.01  | 0      | 2,818,104  | 0              |  | 20.00 |
| 21.00 | CLINICAL LAB ADMIN MED               | 18.00  | 0      | 136,882    | 0              |  | 21.00 |
| 22.00 | CLINICAL LAB ADMIN PED               | 18.01  | 0      | 30,446     | 0              |  | 22.00 |
| 23.00 | CLINICAL LAB ADMIN OB                | 18.02  | 0      | 417,075    | 0              |  | 23.00 |
| 24.00 | CLINICAL LAB ADMIN SURG              | 18.03  | 0      | 491,228    | 0              |  | 24.00 |
| 25.00 | CLINICAL LAB ADMIN PSYCH             | 18.04  | 0      | 18,422     | 0              |  | 25.00 |
| 26.00 | CLINICAL LAB ADMIN PATH              | 18.05  | 0      | 12,468     | 0              |  | 26.00 |
| 27.00 | CLINICAL LAB ADMIN CARD              | 18.06  | 0      | 2,856      | 0              |  | 27.00 |
| 28.00 | CLINICAL LAB ADMIN NEUR              | 18.08  | 0      | 292,195    | 0              |  | 28.00 |
| 29.00 | CLINICAL LAB ADMIN OCLS              | 18.09  | 0      | 224,620    | 0              |  | 29.00 |
| 30.00 | RUSH UNIVERSITY ADMIN SPLIT          | 18.14  | 0      | 1,971,733  | 0              |  | 30.00 |
| 31.00 | NURSING SCHOOL SPLIT                 | 18.16  | 0      | 3,118,071  | 0              |  | 31.00 |
| 32.00 | I&R SERVICES-SALARY & FRINGES APPRVD | 21.00  | 0      | 10,118,891 | 0              |  | 32.00 |
| 33.00 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 22.00  | 0      | 1,549,008  | 0              |  | 33.00 |
| 34.00 | PARAMED HEALTH SYSTEM MANAGEMENT     | 23.00  | 0      | 462,605    | 0              |  | 34.00 |
| 35.00 | PARAMED MEDICAL PERFUSION TECH       | 23.01  | 0      | 114,470    | 0              |  | 35.00 |
| 36.00 | PARAMED DIETARY                      | 23.02  | 0      | 71,477     | 0              |  | 36.00 |
| 37.00 | PARAMED SPEECH                       | 23.03  | 0      | 260,524    | 0              |  | 37.00 |
| 38.00 | PARAMED OCCUPATIONAL THERAPY         | 23.04  | 0      | 208,773    | 0              |  | 38.00 |
| 39.00 | PARAMED PASTORAL CARE                | 23.06  | 0      | 30,943     | 0              |  | 39.00 |
| 40.00 | PARAMED TECHNOLOGY                   | 23.07  | 0      | 121,279    | 0              |  | 40.00 |
| 41.00 | PARAMED VASCULAR ULTRASOUND          | 23.08  | 0      | 50,140     | 0              |  | 41.00 |
| 42.00 | PARAMED RESPIRATORY THERAPY          | 23.10  | 0      | 102,558    | 0              |  | 42.00 |
| 43.00 | PARAMED PHYSICIANS ASSISTANT         | 23.11  | 0      | 170,660    | 0              |  | 43.00 |
| 44.00 | ADULTS & PEDIATRICS                  | 30.00  | 0      | 13,228,321 | 0              |  | 44.00 |
| 45.00 | SURGICAL INTENSIVE CARE UNIT         | 34.00  | 0      | 3,486,021  | 0              |  | 45.00 |
| 46.00 | MEDICAL INTENSIVE CARE UNIT          | 35.00  | 0      | 3,963,708  | 0              |  | 46.00 |
| 47.00 | PEDIATRIC INTENSIVE CARE UNIT        | 35.01  | 0      | 1,176,996  | 0              |  | 47.00 |
| 48.00 | PREMATURE INTENSIVE CARE UNIT        | 35.02  | 0      | 2,569,697  | 0              |  | 48.00 |
| 49.00 | SUBPROVIDER - IPF                    | 40.00  | 0      | 1,052,290  | 0              |  | 49.00 |
| 50.00 | SUBPROVIDER - IRF                    | 41.00  | 0      | 997,620    | 0              |  | 50.00 |
| 51.00 | OPERATING ROOM                       | 50.00  | 0      | 4,227,399  | 0              |  | 51.00 |
| 52.00 | RECOVERY ROOM                        | 51.00  | 0      | 1,168,622  | 0              |  | 52.00 |
| 53.00 | DELIVERY ROOM & LABOR ROOM           | 52.00  | 0      | 1,186,735  | 0              |  | 53.00 |
| 54.00 | ANESTHESIOLOGY                       | 53.00  | 0      | 1,144,601  | 0              |  | 54.00 |
| 55.00 | RADIOLOGY-DIAGNOSTIC                 | 54.00  | 0      | 3,479,123  | 0              |  | 55.00 |
| 56.00 | RADIOLOGY-THERAPEUTIC                | 55.00  | 0      | 899,510    | 0              |  | 56.00 |
| 57.00 | RADIOISOTOPE                         | 56.00  | 0      | 185,276    | 0              |  | 57.00 |
| 58.00 | LABORATORY                           | 60.00  | 0      | 5,683,663  | 0              |  | 58.00 |
| 59.00 | LABORATORY - HLA                     | 60.01  | 0      | 133,788    | 0              |  | 59.00 |
| 60.00 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 62.00  | 0      | 500,373    | 0              |  | 60.00 |
| 61.00 | RESPIRATORY THERAPY                  | 65.00  | 0      | 1,288,781  | 0              |  | 61.00 |
| 62.00 | PHYSICAL THERAPY                     | 66.00  | 0      | 1,026,337  | 0              |  | 62.00 |
| 63.00 | OCCUPATIONAL THERAPY                 | 67.00  | 0      | 786,727    | 0              |  | 63.00 |
| 64.00 | SPEECH PATHOLOGY                     | 68.00  | 0      | 534,800    | 0              |  | 64.00 |
| 65.00 | ELECTROCARDIOLOGY                    | 69.00  | 0      | 1,095,545  | 0              |  | 65.00 |
| 66.00 | ELECTROENCEPHALOGRAPHY               | 70.00  | 0      | 289,470    | 0              |  | 66.00 |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

|                                | Decreases                            |        |        |             |                |  |       |
|--------------------------------|--------------------------------------|--------|--------|-------------|----------------|--|-------|
|                                | Cost Center                          | Line # | Salary | Other       | Wkst. A-7 Ref. |  |       |
|                                | 6.00                                 | 7.00   | 8.00   | 9.00        | 10.00          |  |       |
| 68.00                          | PSYCH DAY HOSPITAL                   | 76.01  | 0      | 625,076     | 0              |  | 68.00 |
| 69.00                          | CLINIC                               | 90.00  | 0      | 4,621,209   | 0              |  | 69.00 |
| 70.00                          | EMERGENCY                            | 91.00  | 0      | 2,511,154   | 0              |  | 70.00 |
| 71.00                          | KIDNEY ACQUISITION                   | 105.00 | 0      | 349,936     | 0              |  | 71.00 |
| 72.00                          | LIVER ACQUISITION                    | 107.00 | 0      | 175,724     | 0              |  | 72.00 |
| 73.00                          | PANCREAS ACQUISITION                 | 109.00 | 0      | 17,628      | 0              |  | 73.00 |
| 74.00                          | GIFT, FLOWER, COFFEE SHOP & CANTEEN  | 190.00 | 0      | 260,589     | 0              |  | 74.00 |
| 75.00                          | FUND RAISING                         | 190.01 | 0      | 1,648,307   | 0              |  | 75.00 |
| 76.00                          | RUSH DAY SCHOOL                      | 190.02 | 0      | 374,421     | 0              |  | 76.00 |
| 77.00                          | DEPARTMENTAL PROJECTS/RESEARCH       | 191.02 | 0      | 11,618,973  | 0              |  | 77.00 |
| 78.00                          | PHYSICIANS' PRIVATE OFFICES          | 192.00 | 0      | 38,111,836  | 0              |  | 78.00 |
| 79.00                          | MEDICAL COLLEGE                      | 194.00 | 0      | 3,496,112   | 0              |  | 79.00 |
| 80.00                          | AFFIL CORP ARC VENTURES              | 194.01 | 0      | 1,940,024   | 0              |  | 80.00 |
| 81.00                          | AFFIL CORP ROOM 500                  | 194.02 | 0      | 246,230     | 0              |  | 81.00 |
| 82.00                          | AFFIL CORP JOINT VENTURES            | 194.03 | 0      | 1,629,798   | 0              |  | 82.00 |
| 83.00                          | CON - GNE                            | 194.04 | 0      | 23,779      | 0              |  | 83.00 |
|                                | TOTALS                               |        | 0      | 191,377,167 |                |  |       |
| B - PARKING GARAGE RECH #49490 |                                      |        |        |             |                |  |       |
| 1.00                           | EMPLOYEE BENEFITS DEPARTMENT         | 4.00   | 0      | 1,200       | 0              |  | 1.00  |
| 2.00                           | RESEARCH ADMINISTRATION              | 5.03   | 0      | 3,730       | 0              |  | 2.00  |
| 3.00                           | ADMIN & GEN OUTPT SERVICE            | 5.05   | 0      | 100         | 0              |  | 3.00  |
| 4.00                           | ADMIN & GEN PT SERVICE               | 5.07   | 0      | 8,680       | 0              |  | 4.00  |
| 5.00                           | PERSONNEL DEPARTMENT                 | 5.08   | 0      | 53,000      | 0              |  | 5.00  |
| 6.00                           | RESEARCH FACULTY                     | 5.09   | 0      | 8,930       | 0              |  | 6.00  |
| 7.00                           | RESEARCH SPA                         | 5.10   | 0      | 2,030       | 0              |  | 7.00  |
| 8.00                           | CORPORATE ADMINISTRATION             | 5.11   | 0      | 21,990      | 0              |  | 8.00  |
| 9.00                           | MAINTENANCE & REPAIRS                | 6.00   | 0      | 300         | 0              |  | 9.00  |
| 10.00                          | DIETARY                              | 10.00  | 0      | 100         | 0              |  | 10.00 |
| 11.00                          | NURSING ADMINISTRATION               | 13.00  | 0      | 4,500       | 0              |  | 11.00 |
| 12.00                          | PHARMACY                             | 15.00  | 0      | 2,900       | 0              |  | 12.00 |
| 13.00                          | MEDICAL RECORDS & LIBRARY            | 16.00  | 0      | 300         | 0              |  | 13.00 |
| 14.00                          | MEDICAL RECORDS & LIBRARY            | 16.01  | 0      | 100         | 0              |  | 14.00 |
| 15.00                          | CLINICAL LAB ADMIN OB                | 18.02  | 0      | 400         | 0              |  | 15.00 |
| 16.00                          | CLINICAL LAB ADMIN SURG              | 18.03  | 0      | 300         | 0              |  | 16.00 |
| 17.00                          | CLINICAL LAB ADMIN PATH              | 18.05  | 0      | 500         | 0              |  | 17.00 |
| 18.00                          | CLINICAL LAB ADMIN NEUR              | 18.08  | 0      | 530         | 0              |  | 18.00 |
| 20.00                          | RUSH UNIVERSITY ADMIN SPLIT          | 18.14  | 0      | 23,110      | 0              |  | 20.00 |
| 21.00                          | NURSING SCHOOL SPLIT                 | 18.16  | 0      | 10,500      | 0              |  | 21.00 |
| 22.00                          | I&R SERVICES-SALARY & FRINGES APPRVD | 21.00  | 0      | 547,646     | 0              |  | 22.00 |
| 23.00                          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 22.00  | 0      | 8,500       | 0              |  | 23.00 |
| 24.00                          | PARAMED HEALTH SYSTEM MANAGEMENT     | 23.00  | 0      | 4,560       | 0              |  | 24.00 |
| 25.00                          | PARAMED MEDICAL PERFUSION TECH       | 23.01  | 0      | 400         | 0              |  | 25.00 |
| 26.00                          | PARAMED SPEECH                       | 23.03  | 0      | 2,000       | 0              |  | 26.00 |
| 27.00                          | PARAMED TECHNOLOGY                   | 23.07  | 0      | 300         | 0              |  | 27.00 |
| 28.00                          | PARAMED VASCULAR ULTRASOUND          | 23.08  | 0      | 1,300       | 0              |  | 28.00 |
| 29.00                          | ADULTS & PEDIATRICS                  | 30.00  | 0      | 6,950       | 0              |  | 29.00 |
| 31.00                          | PEDIATRIC INTENSIVE CARE UNIT        | 35.01  | 0      | 100         | 0              |  | 31.00 |
| 32.00                          | SUBPROVIDER - IRF                    | 41.00  | 0      | 2,000       | 0              |  | 32.00 |
| 34.00                          | RECOVERY ROOM                        | 51.00  | 0      | 8,040       | 0              |  | 34.00 |
| 35.00                          | RADIOLOGY-DIAGNOSTIC                 | 54.00  | 0      | 7,890       | 0              |  | 35.00 |
| 37.00                          | LABORATORY                           | 60.00  | 0      | 7,070       | 0              |  | 37.00 |
| 38.00                          | WHOLE BLOOD & PACKED RED BLOOD CELLS | 62.00  | 0      | 700         | 0              |  | 38.00 |
| 39.00                          | RESPIRATORY THERAPY                  | 65.00  | 0      | 1,400       | 0              |  | 39.00 |
| 40.00                          | SPEECH PATHOLOGY                     | 68.00  | 0      | 1,900       | 0              |  | 40.00 |
| 41.00                          | PSYCH DAY HOSPITAL                   | 76.01  | 0      | 40,300      | 0              |  | 41.00 |
| 42.00                          | CLINIC                               | 90.00  | 0      | 33,160      | 0              |  | 42.00 |
| 43.00                          | GIFT, FLOWER, COFFEE SHOP & CANTEEN  | 190.00 | 0      | 3,410       | 0              |  | 43.00 |
| 44.00                          | FUND RAISING                         | 190.01 | 0      | 7,700       | 0              |  | 44.00 |
| 45.00                          | DEPARTMENTAL PROJECTS/RESEARCH       | 191.02 | 0      | 77,880      | 0              |  | 45.00 |
| 46.00                          | PHYSICIANS' PRIVATE OFFICES          | 192.00 | 0      | 40,930      | 0              |  | 46.00 |
| 47.00                          | MEDICAL COLLEGE                      | 194.00 | 0      | 20,700      | 0              |  | 47.00 |
| 49.00                          | PARAMED MEDICAL PHYSICS              | 23.05  | 0      | 2,000       | 0              |  | 49.00 |
| 50.00                          | PARAMED PHYSICIANS ASSISTANT         | 23.11  | 0      | 700         | 0              |  | 50.00 |
| 51.00                          | ANESTHESIOLOGY                       | 53.00  | 0      | 1,000       | 0              |  | 51.00 |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

|                        |                                      | Decreases |        |             |                |  | 11/24/2019 4:22 pm |  |
|------------------------|--------------------------------------|-----------|--------|-------------|----------------|--|--------------------|--|
|                        | Cost Center                          | Line #    | Salary | Other       | Wkst. A-7 Ref. |  |                    |  |
|                        | 6.00                                 | 7.00      | 8.00   | 9.00        | 10.00          |  |                    |  |
| 52.00                  | OCCUPATIONAL THERAPY                 | 67.00     | 0      | 130         | 0              |  | 52.00              |  |
| 53.00                  | AFFIL CORP ROOM 500                  | 194.02    | 0      | 100         | 0              |  | 53.00              |  |
| 54.00                  | ADMIN & GEN ANIMAL LAB               | 5.06      | 0      | 100         | 0              |  | 54.00              |  |
| 55.00                  | PARAMED RESPIRATORY THERAPY          | 23.10     | 0      | 400         | 0              |  | 55.00              |  |
| 56.00                  | PARAMED OCCUPATIONAL THERAPY         | 23.04     | 0      | 1,500       | 0              |  | 56.00              |  |
| TOTALS                 |                                      |           | 0      | 973,966     |                |  |                    |  |
| C - REAL ESTATE TAX    |                                      |           |        |             |                |  |                    |  |
| 1.00                   | MAINTENANCE & REPAIRS                | 6.00      | 0      | 1,716,972   | 0              |  | 1.00               |  |
| TOTALS                 |                                      |           | 0      | 1,716,972   |                |  |                    |  |
| D - PROPERTY INSURANCE |                                      |           |        |             |                |  |                    |  |
| 1.00                   | EMPLOYEE BENEFITS DEPARTMENT         | 4.00      | 0      | 63,823      | 9              |  | 1.00               |  |
| 2.00                   | PARKING GARAGE                       | 5.02      | 0      | 9,372       | 0              |  | 2.00               |  |
| 3.00                   | CORPORATE ADMINISTRATION             | 5.11      | 0      | 2,404,528   | 0              |  | 3.00               |  |
| 4.00                   | MAINTENANCE & REPAIRS                | 6.00      | 0      | 25,775      | 0              |  | 4.00               |  |
| 5.00                   | CAFETERIA                            | 11.00     | 0      | 2,343       | 0              |  | 5.00               |  |
| 6.00                   | RADIOLOGY-DIAGNOSTIC                 | 54.00     | 0      | 2,343       | 0              |  | 6.00               |  |
| 7.00                   | LABORATORY                           | 60.00     | 0      | 2,343       | 0              |  | 7.00               |  |
| 8.00                   | GIFT, FLOWER, COFFEE SHOP & CANTEEN  | 190.00    | 0      | 2,343       | 0              |  | 8.00               |  |
| 9.00                   | AFFIL CORP JOINT VENTURES            | 194.03    | 0      | 329,673     | 0              |  | 9.00               |  |
| TOTALS                 |                                      |           | 0      | 2,842,543   |                |  |                    |  |
| E - CENTRAL SUPPLY     |                                      |           |        |             |                |  |                    |  |
| 1.00                   | CENTRAL SERVICES & SUPPLY            | 14.00     | 0      | 317,474     | 0              |  | 1.00               |  |
| TOTALS                 |                                      |           | 0      | 317,474     |                |  |                    |  |
| F - PHARMACY           |                                      |           |        |             |                |  |                    |  |
| 1.00                   | PHARMACY                             | 15.00     | 0      | 148,003,187 | 0              |  | 1.00               |  |
| TOTALS                 |                                      |           | 0      | 148,003,187 |                |  |                    |  |
| G - SPACE RECH #49940  |                                      |           |        |             |                |  |                    |  |
| 1.00                   | EMPLOYEE BENEFITS DEPARTMENT         | 4.00      | 0      | 125,707     | 9              |  | 1.00               |  |
| 2.00                   | RESEARCH ADMINISTRATION              | 5.03      | 0      | 7,695,943   | 0              |  | 2.00               |  |
| 3.00                   | ADMIN & GEN INPT SERVICE             | 5.04      | 0      | 139,335     | 0              |  | 3.00               |  |
| 4.00                   | ADMIN & GEN OUTPT SERVICE            | 5.05      | 0      | 148,895     | 0              |  | 4.00               |  |
| 5.00                   | ADMIN & GEN ANIMAL LAB               | 5.06      | 0      | 1,620,175   | 0              |  | 5.00               |  |
| 6.00                   | ADMIN & GEN PT SERVICE               | 5.07      | 0      | 3,897,563   | 0              |  | 6.00               |  |
| 7.00                   | PERSONNEL DEPARTMENT                 | 5.08      | 0      | 250,402     | 0              |  | 7.00               |  |
| 8.00                   | RESEARCH FACULTY                     | 5.09      | 0      | 1,932,601   | 0              |  | 8.00               |  |
| 9.00                   | RESEARCH SPA                         | 5.10      | 0      | 529,004     | 0              |  | 9.00               |  |
| 10.00                  | CORPORATE ADMINISTRATION             | 5.11      | 0      | 6,610,023   | 0              |  | 10.00              |  |
| 11.00                  | MAINTENANCE & REPAIRS                | 6.00      | 0      | 56,941      | 0              |  | 11.00              |  |
| 12.00                  | LAUNDRY & LINEN SERVICE              | 8.00      | 0      | 662,080     | 0              |  | 12.00              |  |
| 13.00                  | DIETARY                              | 10.00     | 0      | 141,420     | 0              |  | 13.00              |  |
| 14.00                  | PATIENT FOOD SERVICE                 | 10.01     | 0      | 1,951,867   | 0              |  | 14.00              |  |
| 15.00                  | CAFETERIA                            | 11.00     | 0      | 1,268,675   | 0              |  | 15.00              |  |
| 16.00                  | NURSING ADMINISTRATION               | 13.00     | 0      | 1,018,189   | 0              |  | 16.00              |  |
| 17.00                  | CENTRAL SERVICES & SUPPLY            | 14.00     | 0      | 2,793,167   | 0              |  | 17.00              |  |
| 18.00                  | PHARMACY                             | 15.00     | 0      | 1,313,624   | 0              |  | 18.00              |  |
| 19.00                  | MEDICAL RECORDS & LIBRARY            | 16.00     | 0      | 1,006,182   | 0              |  | 19.00              |  |
| 20.00                  | MEDICAL RECORDS & LIBRARY            | 16.01     | 0      | 769,036     | 0              |  | 20.00              |  |
| 22.00                  | CLINICAL LAB ADMIN PED               | 18.01     | 0      | 108,502     | 0              |  | 22.00              |  |
| 23.00                  | CLINICAL LAB ADMIN OB                | 18.02     | 0      | 415,948     | 0              |  | 23.00              |  |
| 24.00                  | CLINICAL LAB ADMIN SURG              | 18.03     | 0      | 378,944     | 0              |  | 24.00              |  |
| 25.00                  | CLINICAL LAB ADMIN PATH              | 18.05     | 0      | 1,064,007   | 0              |  | 25.00              |  |
| 26.00                  | CLINICAL LAB ADMIN NEUR              | 18.08     | 0      | 37,865      | 0              |  | 26.00              |  |
| 27.00                  | CLINICAL LAB ADMIN OCLS              | 18.09     | 0      | 97,693      | 0              |  | 27.00              |  |
| 28.00                  | RUSH UNIVERSITY ADMIN SPLIT          | 18.14     | 0      | 3,576,146   | 0              |  | 28.00              |  |
| 29.00                  | NURSING SCHOOL SPLIT                 | 18.16     | 0      | 695,640     | 0              |  | 29.00              |  |
| 30.00                  | I&R SERVICES-SALARY & FRINGES APPRVD | 21.00     | 0      | 1,382,813   | 0              |  | 30.00              |  |
| 31.00                  | I&R SERVICES-OTHER PRGM COSTS APPRVD | 22.00     | 0      | 963,129     | 0              |  | 31.00              |  |
| 32.00                  | PARAMED HEALTH SYSTEM MANAGEMENT     | 23.00     | 0      | 191,905     | 0              |  | 32.00              |  |
| 33.00                  | PARAMED MEDICAL PERFUSION TECH       | 23.01     | 0      | 10,280      | 0              |  | 33.00              |  |
| 34.00                  | PARAMED SPEECH                       | 23.03     | 0      | 146,767     | 0              |  | 34.00              |  |
| 35.00                  | PARAMED OCCUPATIONAL THERAPY         | 23.04     | 0      | 69,906      | 0              |  | 35.00              |  |
| 36.00                  | PARAMED TECHNOLOGY                   | 23.07     | 0      | 26,920      | 0              |  | 36.00              |  |
| 37.00                  | PARAMED VASCULAR ULTRASOUND          | 23.08     | 0      | 10,521      | 0              |  | 37.00              |  |
| 38.00                  | PARAMED RESPIRATORY THERAPY          | 23.10     | 0      | 37,581      | 0              |  | 38.00              |  |
| 39.00                  | PARAMED PHYSICIANS ASSISTANT         | 23.11     | 0      | 28,102      | 0              |  | 39.00              |  |
| 40.00                  | ADULTS & PEDIATRICS                  | 30.00     | 0      | 19,941,884  | 0              |  | 40.00              |  |
| 41.00                  | SURGICAL INTENSIVE CARE UNIT         | 34.00     | 0      | 3,320,513   | 0              |  | 41.00              |  |
| 42.00                  | MEDICAL INTENSIVE CARE UNIT          | 35.00     | 0      | 3,520,715   | 0              |  | 42.00              |  |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

|                          |                                      | Decreases |            |             |                |  | 11/27/2010 4:12 PM |  |
|--------------------------|--------------------------------------|-----------|------------|-------------|----------------|--|--------------------|--|
|                          | Cost Center                          | Line #    | Salary     | Other       | Wkst. A-7 Ref. |  |                    |  |
|                          | 6.00                                 | 7.00      | 8.00       | 9.00        | 10.00          |  |                    |  |
| 43.00                    | PEDIATRIC INTENSIVE CARE UNIT        | 35.01     | 0          | 976,561     | 0              |  | 43.00              |  |
| 44.00                    | PREMATURE INTENSIVE CARE UNIT        | 35.02     | 0          | 2,963,112   | 0              |  | 44.00              |  |
| 45.00                    | SUBPROVIDER - IPF                    | 40.00     | 0          | 2,314,291   | 0              |  | 45.00              |  |
| 46.00                    | SUBPROVIDER - IRF                    | 41.00     | 0          | 1,906,926   | 0              |  | 46.00              |  |
| 47.00                    | OPERATING ROOM                       | 50.00     | 0          | 9,355,189   | 0              |  | 47.00              |  |
| 48.00                    | RECOVERY ROOM                        | 51.00     | 0          | 2,167,527   | 0              |  | 48.00              |  |
| 49.00                    | DELIVERY ROOM & LABOR ROOM           | 52.00     | 0          | 1,636,324   | 0              |  | 49.00              |  |
| 50.00                    | ANESTHESIOLOGY                       | 53.00     | 0          | 1,241,417   | 0              |  | 50.00              |  |
| 51.00                    | RADIOLOGY-DIAGNOSTIC                 | 54.00     | 0          | 6,232,073   | 0              |  | 51.00              |  |
| 52.00                    | RADIOLOGY-THERAPEUTIC                | 55.00     | 0          | 1,636,960   | 0              |  | 52.00              |  |
| 53.00                    | RADIOISOTOPE                         | 56.00     | 0          | 429,797     | 0              |  | 53.00              |  |
| 54.00                    | LABORATORY                           | 60.00     | 0          | 7,042,750   | 0              |  | 54.00              |  |
| 55.00                    | LABORATORY - HLA                     | 60.01     | 0          | 110,295     | 0              |  | 55.00              |  |
| 56.00                    | WHOLE BLOOD & PACKED RED BLOOD CELLS | 62.00     | 0          | 559,568     | 0              |  | 56.00              |  |
| 57.00                    | RESPIRATORY THERAPY                  | 65.00     | 0          | 501,561     | 0              |  | 57.00              |  |
| 58.00                    | PHYSICAL THERAPY                     | 66.00     | 0          | 953,865     | 0              |  | 58.00              |  |
| 59.00                    | OCCUPATIONAL THERAPY                 | 67.00     | 0          | 899,609     | 0              |  | 59.00              |  |
| 60.00                    | SPEECH PATHOLOGY                     | 68.00     | 0          | 622,830     | 0              |  | 60.00              |  |
| 61.00                    | ELECTROCARDIOLOGY                    | 69.00     | 0          | 1,114,191   | 0              |  | 61.00              |  |
| 62.00                    | ELECTROENCEPHALOGRAPHY               | 70.00     | 0          | 190,552     | 0              |  | 62.00              |  |
| 64.00                    | RENAL DIALYSIS ADULT                 | 76.00     | 0          | 62,694      | 0              |  | 64.00              |  |
| 65.00                    | PSYCH DAY HOSPITAL                   | 76.01     | 0          | 502,547     | 0              |  | 65.00              |  |
| 66.00                    | CLINIC                               | 90.00     | 0          | 5,594,802   | 0              |  | 66.00              |  |
| 67.00                    | EMERGENCY                            | 91.00     | 0          | 3,880,316   | 0              |  | 67.00              |  |
| 68.00                    | KIDNEY ACQUISITION                   | 105.00    | 0          | 127,174     | 0              |  | 68.00              |  |
| 69.00                    | LIVER ACQUISITION                    | 107.00    | 0          | 39,355      | 0              |  | 69.00              |  |
| 70.00                    | PANCREAS ACQUISITION                 | 109.00    | 0          | 309         | 0              |  | 70.00              |  |
| 71.00                    | GIFT, FLOWER, COFFEE SHOP & CANTEEN  | 190.00    | 0          | 2,399,716   | 0              |  | 71.00              |  |
| 72.00                    | FUND RAISING                         | 190.01    | 0          | 152,681     | 0              |  | 72.00              |  |
| 73.00                    | PHYSICIANS' PRIVATE OFFICES          | 192.00    | 0          | 8,419,754   | 0              |  | 73.00              |  |
| 74.00                    | MEDICAL COLLEGE                      | 194.00    | 0          | 958,563     | 0              |  | 74.00              |  |
| 75.00                    | AFFIL CORP ARC VENTURES              | 194.01    | 0          | 289,694     | 0              |  | 75.00              |  |
| 76.00                    | AFFIL CORP ROOM 500                  | 194.02    | 0          | 1,302,953   | 0              |  | 76.00              |  |
| 77.00                    | PARAMED DIETARY                      | 23.02     | 0          | 38,321      | 0              |  | 77.00              |  |
| 78.00                    | DEPARTMENTAL PROJECTS/RESEARCH       | 191.02    | 0          | 116,141     | 0              |  | 78.00              |  |
| 79.00                    | PARAMED PASTORAL CARE                | 23.06     | 0          | 916         | 0              |  | 79.00              |  |
| TOTALS                   |                                      |           | 0          | 136,697,944 |                |  |                    |  |
| H - AFFIL CORP OH #45969 |                                      |           |            |             |                |  |                    |  |
| 1.00                     | CORPORATE ADMINISTRATION             | 5.11      | 0          | 6,959,764   | 0              |  | 1.00               |  |
| 2.00                     | NURSING SCHOOL SPLIT                 | 18.16     | 0          | 7,623,049   | 0              |  | 2.00               |  |
| 3.00                     | I&R SERVICES-SALARY & FRINGES APPRVD | 21.00     | 0          | 7,760,304   | 0              |  | 3.00               |  |
| 4.00                     | PARAMED HEALTH SYSTEM MANAGEMENT     | 23.00     | 0          | 5,995,356   | 0              |  | 4.00               |  |
| 5.00                     | CLINIC                               | 90.00     | 0          | 6,384,830   | 0              |  | 5.00               |  |
| 6.00                     | DEPARTMENTAL PROJECTS/RESEARCH       | 191.02    | 0          | 17,888,494  | 0              |  | 6.00               |  |
| 7.00                     | PHYSICIANS' PRIVATE OFFICES          | 192.00    | 0          | 32,695,062  | 0              |  | 7.00               |  |
| 8.00                     | MEDICAL COLLEGE                      | 194.00    | 0          | 7,402,356   | 0              |  | 8.00               |  |
| 9.00                     | ADULTS & PEDIATRICS                  | 30.00     | 0          | 330         | 0              |  | 9.00               |  |
| TOTALS                   |                                      |           | 0          | 92,709,545  |                |  |                    |  |
| I - NURSE ANESTH         |                                      |           |            |             |                |  |                    |  |
| 1.00                     | ANESTHESIOLOGY                       | 53.00     | 3,666,678  | 0           | 0              |  | 1.00               |  |
| TOTALS                   |                                      |           | 3,666,678  | 0           |                |  |                    |  |
| J - DATA CENTER          |                                      |           |            |             |                |  |                    |  |
| 1.00                     | CORPORATE ADMINISTRATION             | 5.11      | 16,357,355 | 37,259,459  | 0              |  | 1.00               |  |
| TOTALS                   |                                      |           | 16,357,355 | 37,259,459  |                |  |                    |  |
| K - PASTORAL CARE        |                                      |           |            |             |                |  |                    |  |
| 1.00                     | PARAMED PASTORAL CARE                | 23.06     | 140,650    | 31,859      | 0              |  | 1.00               |  |
| 2.00                     | ADMIN & GEN PT SERVICE               | 5.07      | 540,127    | 25,719      | 0              |  | 2.00               |  |
| 3.00                     | PARAMED HEALTH SYSTEM MANAGEMENT     | 23.00     | 0          | 21,432      | 0              |  | 3.00               |  |
| TOTALS                   |                                      |           | 680,777    | 79,010      |                |  |                    |  |
| L - MALPRACTICE          |                                      |           |            |             |                |  |                    |  |
| 1.00                     | PHYSICIANS' PRIVATE OFFICES          | 192.00    | 0          | 20,769,318  | 0              |  | 1.00               |  |
| TOTALS                   |                                      |           | 0          | 20,769,318  |                |  |                    |  |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet A-6  
Date/Time Prepared:  
11/24/2019 4:22 pm

|       | Decreases                           |        |           |            |                |  |       |
|-------|-------------------------------------|--------|-----------|------------|----------------|--|-------|
|       | Cost Center                         | Line # | Salary    | Other      | Wkst. A-7 Ref. |  |       |
|       | 6.00                                | 7.00   | 8.00      | 9.00       | 10.00          |  |       |
|       | M - DEPRECIATION                    |        |           |            |                |  |       |
| 1.00  | DEPRECIATION OLD HOSPITAL           | 1.01   | 0         | 49,399,548 | 9              |  | 1.00  |
| 2.00  | CORPORATE ADMINISTRATION            | 5.11   | 0         | 47,187,413 | 9              |  | 2.00  |
| 3.00  |                                     | 0.00   | 0         | 0          | 9              |  | 3.00  |
| 4.00  |                                     | 0.00   | 0         | 0          | 9              |  | 4.00  |
| 5.00  |                                     | 0.00   | 0         | 0          | 9              |  | 5.00  |
| 6.00  |                                     | 0.00   | 0         | 0          | 9              |  | 6.00  |
| 7.00  |                                     | 0.00   | 0         | 0          | 9              |  | 7.00  |
| 8.00  |                                     | 0.00   | 0         | 0          | 9              |  | 8.00  |
| 9.00  |                                     | 0.00   | 0         | 0          | 9              |  | 9.00  |
| 10.00 |                                     | 0.00   | 0         | 0          | 9              |  | 10.00 |
| 11.00 |                                     | 0.00   | 0         | 0          | 9              |  | 11.00 |
| 12.00 |                                     | 0.00   | 0         | 0          | 9              |  | 12.00 |
| 13.00 |                                     | 0.00   | 0         | 0          | 9              |  | 13.00 |
| 14.00 |                                     | 0.00   | 0         | 0          | 9              |  | 14.00 |
| 15.00 |                                     | 0.00   | 0         | 0          | 9              |  | 15.00 |
| 16.00 |                                     | 0.00   | 0         | 0          | 9              |  | 16.00 |
| 17.00 |                                     | 0.00   | 0         | 0          | 9              |  | 17.00 |
|       | TOTALS                              |        | 0         | 96,586,961 |                |  |       |
|       | N - INTEREST                        |        |           |            |                |  |       |
| 1.00  | CORPORATE ADMINISTRATION            | 5.11   | 0         | 16,559,969 | 11             |  | 1.00  |
| 2.00  |                                     | 0.00   | 0         | 0          | 11             |  | 2.00  |
| 3.00  |                                     | 0.00   | 0         | 0          | 11             |  | 3.00  |
| 4.00  |                                     | 0.00   | 0         | 0          | 11             |  | 4.00  |
| 5.00  |                                     | 0.00   | 0         | 0          | 11             |  | 5.00  |
| 6.00  |                                     | 0.00   | 0         | 0          | 11             |  | 6.00  |
| 7.00  |                                     | 0.00   | 0         | 0          | 11             |  | 7.00  |
| 8.00  |                                     | 0.00   | 0         | 0          | 11             |  | 8.00  |
|       | TOTALS                              |        | 0         | 16,559,969 |                |  |       |
|       | O - NURSING SALARY                  |        |           |            |                |  |       |
| 1.00  | ADULTS & PEDIATRICS                 | 30.00  | 1,825,095 | 1,470,664  | 0              |  | 1.00  |
|       | TOTALS                              |        | 1,825,095 | 1,470,664  |                |  |       |
|       | P - PHYSICS RESIDENTS               |        |           |            |                |  |       |
| 1.00  | CORPORATE ADMINISTRATION            | 5.11   | 8,284     | 0          | 0              |  | 1.00  |
| 2.00  | RADIOLOGY-THERAPEUTIC               | 55.00  | 248,101   | 0          | 0              |  | 2.00  |
|       | TOTALS                              |        | 256,385   | 0          |                |  |       |
|       | Q - DIRECT EDUCATION                |        |           |            |                |  |       |
| 1.00  | RESEARCH ADMINISTRATION             | 5.03   | 57,043    | 0          | 0              |  | 1.00  |
| 2.00  | RESEARCH FACULTY                    | 5.09   | 1,200     | 0          | 0              |  | 2.00  |
| 3.00  | RESEARCH SPA                        | 5.10   | 1,875     | 0          | 0              |  | 3.00  |
| 4.00  | CLINICAL LAB ADMIN OB               | 18.02  | 11,320    | 0          | 0              |  | 4.00  |
| 5.00  | CLINICAL LAB ADMIN PATH             | 18.05  | 3,657     | 0          | 0              |  | 5.00  |
| 6.00  | CLINICAL LAB ADMIN NEUR             | 18.08  | 139,420   | 0          | 0              |  | 6.00  |
| 7.00  | DISCRETIONARY OPERATIONS            | 18.12  | 340,264   | 0          | 0              |  | 7.00  |
| 8.00  | RUSH UNIVERSITY ADMIN SPLIT         | 18.14  | 1,500     | 0          | 0              |  | 8.00  |
| 9.00  | NURSING SCHOOL SPLIT                | 18.16  | 650       | 0          | 0              |  | 9.00  |
| 10.00 | PARAMED SPEECH                      | 23.03  | 400       | 0          | 0              |  | 10.00 |
| 11.00 | MEDICAL INTENSIVE CARE UNIT         | 35.00  | 58,690    | 0          | 0              |  | 11.00 |
| 12.00 | RADIOLOGY-THERAPEUTIC               | 55.00  | 124,435   | 0          | 0              |  | 12.00 |
| 13.00 | LABORATORY                          | 60.00  | 13,108    | 0          | 0              |  | 13.00 |
| 14.00 | OTHER SPONSORED PROJECTS/DRUG STUDY | 191.01 | 309,847   | 0          | 0              |  | 14.00 |
| 15.00 | DEPARTMENTAL PROJECTS/RESEARCH      | 191.02 | 68,354    | 0          | 0              |  | 15.00 |
| 16.00 | PHYSICIANS' PRIVATE OFFICES         | 192.00 | 733,258   | 0          | 0              |  | 16.00 |
| 17.00 | MEDICAL COLLEGE                     | 194.00 | 5,220     | 0          | 0              |  | 17.00 |
|       | TOTALS                              |        | 1,870,241 | 0          |                |  |       |
|       | R - NON-RESEARCH                    |        |           |            |                |  |       |
| 1.00  | DISCRETIONARY OPERATIONS            | 18.12  | 5,631,975 | 6,253,485  | 0              |  | 1.00  |
| 2.00  |                                     | 0.00   | 0         | 0          | 0              |  | 2.00  |
| 3.00  |                                     | 0.00   | 0         | 0          | 0              |  | 3.00  |
| 4.00  |                                     | 0.00   | 0         | 0          | 0              |  | 4.00  |
| 5.00  |                                     | 0.00   | 0         | 0          | 0              |  | 5.00  |
| 6.00  |                                     | 0.00   | 0         | 0          | 0              |  | 6.00  |
| 7.00  |                                     | 0.00   | 0         | 0          | 0              |  | 7.00  |
| 8.00  |                                     | 0.00   | 0         | 0          | 0              |  | 8.00  |
| 9.00  |                                     | 0.00   | 0         | 0          | 0              |  | 9.00  |
| 10.00 |                                     | 0.00   | 0         | 0          | 0              |  | 10.00 |
| 11.00 |                                     | 0.00   | 0         | 0          | 0              |  | 11.00 |
| 12.00 |                                     | 0.00   | 0         | 0          | 0              |  | 12.00 |
| 13.00 | RUSH UNIVERSITY ADMIN SPLIT         | 18.14  | 0         | 114,264    | 0              |  | 13.00 |
| 14.00 | NURSING SCHOOL SPLIT                | 18.16  | 0         | 569,786    | 0              |  | 14.00 |
| 15.00 |                                     | 0.00   | 0         | 0          | 0              |  | 15.00 |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

|                                      |                                      | Decreases |           |            |                |  | 11/24/2019 4:22 pm |  |
|--------------------------------------|--------------------------------------|-----------|-----------|------------|----------------|--|--------------------|--|
|                                      | Cost Center                          | Line #    | Salary    | Other      | Wkst. A-7 Ref. |  |                    |  |
|                                      | 6.00                                 | 7.00      | 8.00      | 9.00       | 10.00          |  |                    |  |
| 16.00                                | PARAMED HEALTH SYSTEM MANAGEMENT     | 23.00     | 0         | 718,834    | 0              |  | 16.00              |  |
| 17.00                                |                                      | 0.00      | 0         | 0          | 0              |  | 17.00              |  |
| 18.00                                |                                      | 0.00      | 0         | 0          | 0              |  | 18.00              |  |
| 19.00                                |                                      | 0.00      | 0         | 0          | 0              |  | 19.00              |  |
| 20.00                                |                                      | 0.00      | 0         | 0          | 0              |  | 20.00              |  |
| 21.00                                |                                      | 0.00      | 0         | 0          | 0              |  | 21.00              |  |
| 22.00                                |                                      | 0.00      | 0         | 0          | 0              |  | 22.00              |  |
| 23.00                                | MEDICAL COLLEGE                      | 194.00    | 0         | 608,421    | 0              |  | 23.00              |  |
| TOTALS                               |                                      |           | 5,631,975 | 8,264,790  |                |  |                    |  |
| S - HSM TEACHING                     |                                      |           |           |            |                |  |                    |  |
| 1.00                                 | EMPLOYEE BENEFITS DEPARTMENT         | 4.00      | 2,914     | 0          | 0              |  | 1.00               |  |
| 2.00                                 | RESEARCH ADMINISTRATION              | 5.03      | 36,372    | 0          | 0              |  | 2.00               |  |
| 3.00                                 | ADMIN & GEN PT SERVICE               | 5.07      | 52,922    | 0          | 0              |  | 3.00               |  |
| 4.00                                 | PERSONNEL DEPARTMENT                 | 5.08      | 34,505    | 0          | 0              |  | 4.00               |  |
| 5.00                                 | RESEARCH FACULTY                     | 5.09      | 9,762     | 0          | 0              |  | 5.00               |  |
| 6.00                                 | RESEARCH SPA                         | 5.10      | 1         | 0          | 0              |  | 6.00               |  |
| 7.00                                 | CORPORATE ADMINISTRATION             | 5.11      | 497,938   | 0          | 0              |  | 7.00               |  |
| 8.00                                 | MAINTENANCE & REPAIRS                | 6.00      | 127,434   | 0          | 0              |  | 8.00               |  |
| 9.00                                 | MEDICAL RECORDS & LIBRARY            | 16.01     | 608       | 0          | 0              |  | 9.00               |  |
| 10.00                                | CLINICAL LAB ADMIN OB                | 18.02     | 9,703     | 0          | 0              |  | 10.00              |  |
| 11.00                                | CLINICAL LAB ADMIN SURG              | 18.03     | 4,157     | 0          | 0              |  | 11.00              |  |
| 12.00                                | CLINICAL LAB ADMIN CARD              | 18.06     | 155       | 0          | 0              |  | 12.00              |  |
| 13.00                                | CLINICAL LAB ADMIN NEUR              | 18.08     | 67        | 0          | 0              |  | 13.00              |  |
| 14.00                                | DISCRETIONARY OPERATIONS             | 18.12     | 1,200     | 0          | 0              |  | 14.00              |  |
| 15.00                                | RUSH UNIVERSITY ADMIN SPLIT          | 18.14     | 3,931     | 0          | 0              |  | 15.00              |  |
| 16.00                                | NURSING SCHOOL SPLIT                 | 18.16     | 12,375    | 0          | 0              |  | 16.00              |  |
| 17.00                                | I&R SERVICES-SALARY & FRINGES APPRVD | 21.00     | 1         | 0          | 0              |  | 17.00              |  |
| 18.00                                | I&R SERVICES-OTHER PRGM COSTS APPRVD | 22.00     | 676       | 0          | 0              |  | 18.00              |  |
| 19.00                                | PARAMED HEALTH SYSTEM MANAGEMENT     | 23.00     | 548,980   | 0          | 0              |  | 19.00              |  |
| 20.00                                | KIDNEY ACQUISITION                   | 105.00    | 31        | 0          | 0              |  | 20.00              |  |
| 21.00                                | LIVER ACQUISITION                    | 107.00    | 21        | 0          | 0              |  | 21.00              |  |
| 22.00                                | RESEARCH                             | 191.00    | 10,227    | 0          | 0              |  | 22.00              |  |
| 23.00                                | OTHER SPONSORED PROJECTS/DRUG STUDY  | 191.01    | 84,672    | 0          | 0              |  | 23.00              |  |
| 24.00                                | PHYSICIANS' PRIVATE OFFICES          | 192.00    | 59,670    | 0          | 0              |  | 24.00              |  |
| 25.00                                | MEDICAL COLLEGE                      | 194.00    | 501       | 0          | 0              |  | 25.00              |  |
| TOTALS                               |                                      |           | 1,498,823 | 0          |                |  |                    |  |
| T - TUITION ASSISTANCE               |                                      |           |           |            |                |  |                    |  |
| 1.00                                 | EMPLOYEE BENEFITS DEPARTMENT         | 4.00      | 0         | 6,947,507  | 0              |  | 1.00               |  |
| 2.00                                 |                                      | 0.00      | 0         | 0          | 0              |  | 2.00               |  |
| TOTALS                               |                                      |           | 0         | 6,947,507  |                |  |                    |  |
| U - ACCREATION                       |                                      |           |           |            |                |  |                    |  |
| 1.00                                 | DEPRECIATION OLD HOSPITAL            | 1.01      | 0         | 1,032,089  | 9              |  | 1.00               |  |
| 2.00                                 |                                      | 0.00      | 0         | 0          | 9              |  | 2.00               |  |
| 3.00                                 |                                      | 0.00      | 0         | 0          | 9              |  | 3.00               |  |
| 4.00                                 |                                      | 0.00      | 0         | 0          | 9              |  | 4.00               |  |
| 5.00                                 |                                      | 0.00      | 0         | 0          | 9              |  | 5.00               |  |
| 6.00                                 |                                      | 0.00      | 0         | 0          | 9              |  | 6.00               |  |
| 7.00                                 |                                      | 0.00      | 0         | 0          | 9              |  | 7.00               |  |
| 8.00                                 |                                      | 0.00      | 0         | 0          | 9              |  | 8.00               |  |
| 9.00                                 |                                      | 0.00      | 0         | 0          | 9              |  | 9.00               |  |
| 10.00                                |                                      | 0.00      | 0         | 0          | 9              |  | 10.00              |  |
| 11.00                                |                                      | 0.00      | 0         | 0          | 9              |  | 11.00              |  |
| 12.00                                |                                      | 0.00      | 0         | 0          | 9              |  | 12.00              |  |
| 13.00                                |                                      | 0.00      | 0         | 0          | 9              |  | 13.00              |  |
| 14.00                                |                                      | 0.00      | 0         | 0          | 9              |  | 14.00              |  |
| 15.00                                |                                      | 0.00      | 0         | 0          | 9              |  | 15.00              |  |
| TOTALS                               |                                      |           | 0         | 1,032,089  |                |  |                    |  |
| V - MED SUPPLY & IMPLANT DIRECT COST |                                      |           |           |            |                |  |                    |  |
| 1.00                                 | DRUGS CHARGED TO PATIENTS            | 73.00     | 0         | 137,477    | 0              |  | 1.00               |  |
| 2.00                                 | RADIOLOGY-DIAGNOSTIC                 | 54.00     | 0         | 8,855      | 0              |  | 2.00               |  |
| 3.00                                 | SPEECH PATHOLOGY                     | 68.00     | 0         | 574        | 0              |  | 3.00               |  |
| 5.00                                 | SPEECH PATHOLOGY                     | 68.00     | 0         | 11,025     | 0              |  | 5.00               |  |
| 6.00                                 | SPEECH PATHOLOGY                     | 68.00     | 0         | 9,713      | 0              |  | 6.00               |  |
| 7.00                                 | RADIOLOGY-THERAPEUTIC                | 55.00     | 0         | 216        | 0              |  | 7.00               |  |
| 8.00                                 | DELIVERY ROOM & LABOR ROOM           | 52.00     | 0         | 208        | 0              |  | 8.00               |  |
| 9.00                                 | EMERGENCY                            | 91.00     | 0         | 2,038      | 0              |  | 9.00               |  |
| 10.00                                | OPERATING ROOM                       | 50.00     | 0         | 81,468,840 | 0              |  | 10.00              |  |
| 11.00                                | OPERATING ROOM                       | 50.00     | 0         | 2,252      | 0              |  | 11.00              |  |
| 12.00                                | OPERATING ROOM                       | 50.00     | 0         | 219,411    | 0              |  | 12.00              |  |

## RECLASSIFICATIONS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-6

Date/Time Prepared:  
11/24/2019 4:22 pm

|                        | Decreases                           |        |            |             | Wkst. A-7 Ref. |  |        |
|------------------------|-------------------------------------|--------|------------|-------------|----------------|--|--------|
|                        | Cost Center                         | Line # | Salary     | Other       |                |  |        |
|                        | 6.00                                | 7.00   | 8.00       | 9.00        | 10.00          |  |        |
| 14.00                  | ELECTROCARDIOLOGY                   | 69.00  | 0          | 8,717,936   | 0              |  | 14.00  |
| 15.00                  | ELECTROCARDIOLOGY                   | 69.00  | 0          | 9,788,994   | 0              |  | 15.00  |
| 16.00                  | RADIOLOGY-DIAGNOSTIC                | 54.00  | 0          | 8,210,808   | 0              |  | 16.00  |
| 17.00                  | OPERATING ROOM                      | 50.00  | 0          | 2,816,985   | 0              |  | 17.00  |
| 18.00                  | LABORATORY                          | 60.00  | 0          | 25,483      | 0              |  | 18.00  |
| 19.00                  | ELECTROCARDIOLOGY                   | 69.00  | 0          | 26,808      | 0              |  | 19.00  |
| 20.00                  | CLINIC                              | 90.00  | 0          | 6,426       | 0              |  | 20.00  |
| 21.00                  | CLINIC                              | 90.00  | 0          | 8,204       | 0              |  | 21.00  |
| 22.00                  | CLINIC                              | 90.00  | 0          | 289         | 0              |  | 22.00  |
| 23.00                  | CLINIC                              | 90.00  | 0          | 19          | 0              |  | 23.00  |
| 24.00                  | CLINIC                              | 90.00  | 0          | 181         | 0              |  | 24.00  |
| 25.00                  | CLINIC                              | 90.00  | 0          | 11          | 0              |  | 25.00  |
|                        | TOTALS                              |        | 0          | 111,462,753 |                |  |        |
| W - PHARMACY RESIDENTS |                                     |        |            |             |                |  |        |
| 1.00                   | PHARMACY                            | 15.00  | 632,998    | 25,437      | 0              |  | 1.00   |
|                        | TOTALS                              |        | 632,998    | 25,437      |                |  |        |
| X - DEANS OFFICE       |                                     |        |            |             |                |  |        |
| 1.00                   | PARAMED HEALTH SYSTEM<br>MANAGEMENT | 23.00  | 0          | 3,058,480   | 0              |  | 1.00   |
| 2.00                   |                                     | 0.00   | 0          | 0           | 0              |  | 2.00   |
| 3.00                   |                                     | 0.00   | 0          | 0           | 0              |  | 3.00   |
| 4.00                   |                                     | 0.00   | 0          | 0           | 0              |  | 4.00   |
| 5.00                   |                                     | 0.00   | 0          | 0           | 0              |  | 5.00   |
| 6.00                   |                                     | 0.00   | 0          | 0           | 0              |  | 6.00   |
| 7.00                   |                                     | 0.00   | 0          | 0           | 0              |  | 7.00   |
| 8.00                   |                                     | 0.00   | 0          | 0           | 0              |  | 8.00   |
| 9.00                   |                                     | 0.00   | 0          | 0           | 0              |  | 9.00   |
| 10.00                  |                                     | 0.00   | 0          | 0           | 0              |  | 10.00  |
| 11.00                  |                                     | 0.00   | 0          | 0           | 0              |  | 11.00  |
| 12.00                  |                                     | 0.00   | 0          | 0           | 0              |  | 12.00  |
| 13.00                  |                                     | 0.00   | 0          | 0           | 0              |  | 13.00  |
| 14.00                  |                                     | 0.00   | 0          | 0           | 0              |  | 14.00  |
| 15.00                  |                                     | 0.00   | 0          | 0           | 0              |  | 15.00  |
|                        | TOTALS                              |        | 0          | 3,058,480   |                |  |        |
| 500.00                 | Grand Total: Decreases              |        | 32,420,327 | 878,155,235 |                |  | 500.00 |

## RECONCILIATION OF CAPITAL COSTS CENTERS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet A-7  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                                        |                             | Beginning<br>Balances | Acquisitions                   |          |             | Disposals and<br>Retirements |       |
|--------------------------------------------------------|-----------------------------|-----------------------|--------------------------------|----------|-------------|------------------------------|-------|
|                                                        |                             |                       | Purchases                      | Donation | Total       |                              |       |
|                                                        |                             |                       |                                |          |             |                              |       |
|                                                        |                             | 1.00                  | 2.00                           | 3.00     | 4.00        | 5.00                         |       |
| PART I - ANALYSIS OF CHANGES IN CAPITAL ASSET BALANCES |                             |                       |                                |          |             |                              |       |
| 1.00                                                   | Land                        | 59,586,701            | 4,183,960                      | 0        | 4,183,960   | 0                            | 1.00  |
| 2.00                                                   | Land Improvements           | 0                     | 0                              | 0        | 0           | 0                            | 2.00  |
| 3.00                                                   | Buildings and Fixtures      | 1,719,399,838         | 49,529,258                     | 0        | 49,529,258  | 217,716                      | 3.00  |
| 4.00                                                   | Building Improvements       | 0                     | 0                              | 0        | 0           | 0                            | 4.00  |
| 5.00                                                   | Fixed Equipment             | 155,123,878           | 40,810,219                     | 0        | 40,810,219  | 0                            | 5.00  |
| 6.00                                                   | Movable Equipment           | 588,415,165           | 38,307,736                     | 0        | 38,307,736  | 4,593,331                    | 6.00  |
| 7.00                                                   | HIT designated Assets       | 13,661,615            | 1,118,205                      | 0        | 1,118,205   | 0                            | 7.00  |
| 8.00                                                   | Subtotal (sum of lines 1-7) | 2,536,187,197         | 133,949,378                    | 0        | 133,949,378 | 4,811,047                    | 8.00  |
| 9.00                                                   | Reconciling Items           | 0                     | 0                              | 0        | 0           | 0                            | 9.00  |
| 10.00                                                  | Total (line 8 minus line 9) | 2,536,187,197         | 133,949,378                    | 0        | 133,949,378 | 4,811,047                    | 10.00 |
|                                                        |                             | Ending Balance        | Fully<br>Depreciated<br>Assets |          |             |                              |       |
|                                                        |                             |                       |                                |          |             |                              |       |
|                                                        |                             | 6.00                  | 7.00                           |          |             |                              |       |
| PART I - ANALYSIS OF CHANGES IN CAPITAL ASSET BALANCES |                             |                       |                                |          |             |                              |       |
| 1.00                                                   | Land                        | 63,770,661            | 0                              |          |             |                              | 1.00  |
| 2.00                                                   | Land Improvements           | 0                     | 0                              |          |             |                              | 2.00  |
| 3.00                                                   | Buildings and Fixtures      | 1,768,711,380         | 0                              |          |             |                              | 3.00  |
| 4.00                                                   | Building Improvements       | 0                     | 0                              |          |             |                              | 4.00  |
| 5.00                                                   | Fixed Equipment             | 195,934,097           | 0                              |          |             |                              | 5.00  |
| 6.00                                                   | Movable Equipment           | 622,129,570           | 0                              |          |             |                              | 6.00  |
| 7.00                                                   | HIT designated Assets       | 14,779,820            | 0                              |          |             |                              | 7.00  |
| 8.00                                                   | Subtotal (sum of lines 1-7) | 2,665,325,528         | 0                              |          |             |                              | 8.00  |
| 9.00                                                   | Reconciling Items           | 0                     | 0                              |          |             |                              | 9.00  |
| 10.00                                                  | Total (line 8 minus line 9) | 2,665,325,528         | 0                              |          |             |                              | 10.00 |

## RECONCILIATION OF CAPITAL COSTS CENTERS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet A-7  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                                                       |                                | SUMMARY OF CAPITAL                             |                                       |          |                              |                          |      |
|-------------------------------------------------------------------------------|--------------------------------|------------------------------------------------|---------------------------------------|----------|------------------------------|--------------------------|------|
|                                                                               |                                | Depreciation                                   | Lease                                 | Interest | Insurance (see instructions) | Taxes (see instructions) |      |
|                                                                               |                                | 9.00                                           | 10.00                                 | 11.00    | 12.00                        | 13.00                    |      |
| PART II - RECONCILIATION OF AMOUNTS FROM WORKSHEET A, COLUMN 2, LINES 1 and 2 |                                |                                                |                                       |          |                              |                          |      |
| 1.00                                                                          | CAP REL COSTS-BLDG & FIXT      | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.00 |
| 1.01                                                                          | DEPRECIATION OLD HOSPITAL      | -86,063,678                                    | 0                                     | 0        | 0                            | 0                        | 1.01 |
| 1.02                                                                          | DEPRECIATION DIRECT BLDG       | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.02 |
| 1.03                                                                          | DEPRECIATION KELLOGG PAV       | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.03 |
| 1.04                                                                          | DEPRECIATION JELKE SOUTH       | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.04 |
| 1.05                                                                          | DEPRECIATION ATRIUM PAV        | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.05 |
| 1.06                                                                          | DEPRECIATION PRO BLDG NORTH    | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.06 |
| 1.07                                                                          | DEPRECIATION PRO BLDG SOUTH    | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.07 |
| 1.08                                                                          | DEPRECIATION WOOD ST           | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.08 |
| 1.09                                                                          | DEPRECIATION ACADEMIC FACILITY | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.09 |
| 1.10                                                                          | DEPRECIATION PRO BLDG III      | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.10 |
| 1.11                                                                          | DEPRECIATION JRB               | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.11 |
| 1.12                                                                          | DEPRECIATION TOB               | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.12 |
| 1.13                                                                          | DEPRECIATION EQUIPMENT         | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.13 |
| 1.14                                                                          | DEPRECIATION ORTHOPEDICS       | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.14 |
| 1.15                                                                          | DEPRECIATION KIDSTON           | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.15 |
| 1.16                                                                          | DEPRECIATION COHN              | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.16 |
| 1.17                                                                          | DEPRECIATION TOWER             | 0                                              | 0                                     | 0        | 0                            | 0                        | 1.17 |
| 2.00                                                                          | CAP REL COSTS-MVBLE EQUIP      | 0                                              | 0                                     | 0        | 0                            | 0                        | 2.00 |
| 2.01                                                                          | INTEREST GENERAL               | 0                                              | 0                                     | 0        | 0                            | 0                        | 2.01 |
| 2.02                                                                          | INTEREST DIRECT BLDG           | 0                                              | 0                                     | 0        | 0                            | 0                        | 2.02 |
| 2.03                                                                          | INTEREST ATRUM PAV             | 0                                              | 0                                     | 0        | 0                            | 0                        | 2.03 |
| 2.04                                                                          | INTEREST PRO BLDG SOUTH        | 0                                              | 0                                     | 0        | 0                            | 0                        | 2.04 |
| 2.05                                                                          | INTEREST TOB                   | 0                                              | 0                                     | 0        | 0                            | 0                        | 2.05 |
| 2.06                                                                          | INTEREST PRO BLDG III          | 0                                              | 0                                     | 0        | 0                            | 0                        | 2.06 |
| 2.07                                                                          | INTEREST TOWER                 | 0                                              | 0                                     | 0        | 0                            | 0                        | 2.07 |
| 2.08                                                                          | INTEREST PRO BLDG NORTH        | 0                                              | 0                                     | 0        | 0                            | 0                        | 2.08 |
| 3.00                                                                          | Total (sum of lines 1-2)       | -86,063,678                                    | 0                                     | 0        | 0                            | 0                        | 3.00 |
| Cost Center Description                                                       |                                | SUMMARY OF CAPITAL                             |                                       |          |                              |                          |      |
|                                                                               |                                | Other Capital-Related Costs (see instructions) | Total (1) (sum of cols. 9 through 14) |          |                              |                          |      |
|                                                                               |                                | 14.00                                          | 15.00                                 |          |                              |                          |      |
| PART II - RECONCILIATION OF AMOUNTS FROM WORKSHEET A, COLUMN 2, LINES 1 and 2 |                                |                                                |                                       |          |                              |                          |      |
| 1.00                                                                          | CAP REL COSTS-BLDG & FIXT      | 0                                              | 0                                     |          |                              |                          | 1.00 |
| 1.01                                                                          | DEPRECIATION OLD HOSPITAL      | 0                                              | -86,063,678                           |          |                              |                          | 1.01 |
| 1.02                                                                          | DEPRECIATION DIRECT BLDG       | 0                                              | 0                                     |          |                              |                          | 1.02 |
| 1.03                                                                          | DEPRECIATION KELLOGG PAV       | 0                                              | 0                                     |          |                              |                          | 1.03 |
| 1.04                                                                          | DEPRECIATION JELKE SOUTH       | 0                                              | 0                                     |          |                              |                          | 1.04 |
| 1.05                                                                          | DEPRECIATION ATRIUM PAV        | 0                                              | 0                                     |          |                              |                          | 1.05 |
| 1.06                                                                          | DEPRECIATION PRO BLDG NORTH    | 0                                              | 0                                     |          |                              |                          | 1.06 |
| 1.07                                                                          | DEPRECIATION PRO BLDG SOUTH    | 0                                              | 0                                     |          |                              |                          | 1.07 |
| 1.08                                                                          | DEPRECIATION WOOD ST           | 0                                              | 0                                     |          |                              |                          | 1.08 |
| 1.09                                                                          | DEPRECIATION ACADEMIC FACILITY | 0                                              | 0                                     |          |                              |                          | 1.09 |
| 1.10                                                                          | DEPRECIATION PRO BLDG III      | 0                                              | 0                                     |          |                              |                          | 1.10 |
| 1.11                                                                          | DEPRECIATION JRB               | 0                                              | 0                                     |          |                              |                          | 1.11 |
| 1.12                                                                          | DEPRECIATION TOB               | 0                                              | 0                                     |          |                              |                          | 1.12 |
| 1.13                                                                          | DEPRECIATION EQUIPMENT         | 0                                              | 0                                     |          |                              |                          | 1.13 |
| 1.14                                                                          | DEPRECIATION ORTHOPEDICS       | 0                                              | 0                                     |          |                              |                          | 1.14 |
| 1.15                                                                          | DEPRECIATION KIDSTON           | 0                                              | 0                                     |          |                              |                          | 1.15 |
| 1.16                                                                          | DEPRECIATION COHN              | 0                                              | 0                                     |          |                              |                          | 1.16 |
| 1.17                                                                          | DEPRECIATION TOWER             | 0                                              | 0                                     |          |                              |                          | 1.17 |
| 2.00                                                                          | CAP REL COSTS-MVBLE EQUIP      | 0                                              | 0                                     |          |                              |                          | 2.00 |
| 2.01                                                                          | INTEREST GENERAL               | 0                                              | 0                                     |          |                              |                          | 2.01 |
| 2.02                                                                          | INTEREST DIRECT BLDG           | 0                                              | 0                                     |          |                              |                          | 2.02 |
| 2.03                                                                          | INTEREST ATRUM PAV             | 0                                              | 0                                     |          |                              |                          | 2.03 |
| 2.04                                                                          | INTEREST PRO BLDG SOUTH        | 0                                              | 0                                     |          |                              |                          | 2.04 |
| 2.05                                                                          | INTEREST TOB                   | 0                                              | 0                                     |          |                              |                          | 2.05 |
| 2.06                                                                          | INTEREST PRO BLDG III          | 0                                              | 0                                     |          |                              |                          | 2.06 |
| 2.07                                                                          | INTEREST TOWER                 | 0                                              | 0                                     |          |                              |                          | 2.07 |
| 2.08                                                                          | INTEREST PRO BLDG NORTH        | 0                                              | 0                                     |          |                              |                          | 2.08 |
| 3.00                                                                          | Total (sum of lines 1-2)       | 0                                              | -86,063,678                           |          |                              |                          | 3.00 |

## RECONCILIATION OF CAPITAL COSTS CENTERS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet A-7  
Part III  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                                                    | COMPUTATION OF RATIOS       |                             |                                          | ALLOCATION OF OTHER CAPITAL |           |      |
|-------------------------|----------------------------------------------------|-----------------------------|-----------------------------|------------------------------------------|-----------------------------|-----------|------|
|                         |                                                    | Gross Assets                | Capitalized Leases          | Gross Assets for Ratio (col. 1 - col. 2) | Ratio (see instructions)    | Insurance |      |
|                         |                                                    | 1.00                        | 2.00                        | 3.00                                     | 4.00                        | 5.00      |      |
|                         | PART III - RECONCILIATION OF CAPITAL COSTS CENTERS |                             |                             |                                          |                             |           |      |
| 1.00                    | CAP REL COSTS-BLDG & FIXT                          | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 1.00 |
| 1.01                    | DEPRECIATION OLD HOSPITAL                          | 41,472,550                  | 0                           | 41,472,550                               | 0.016746                    | 0         | 1.01 |
| 1.02                    | DEPRECIATION DIRECT BLDG                           | 312,705,589                 | 0                           | 312,705,589                              | 0.126264                    | 0         | 1.02 |
| 1.03                    | DEPRECIATION KELLOGG PAV                           | 119,687,318                 | 0                           | 119,687,318                              | 0.048327                    | 0         | 1.03 |
| 1.04                    | DEPRECIATION JELKE SOUTH                           | 151,225,526                 | 0                           | 151,225,526                              | 0.061062                    | 0         | 1.04 |
| 1.05                    | DEPRECIATION ATRIUM PAV                            | 210,646,517                 | 0                           | 210,646,517                              | 0.085055                    | 0         | 1.05 |
| 1.06                    | DEPRECIATION PRO BLDG NORTH                        | 43,534,575                  | 0                           | 43,534,575                               | 0.017578                    | 0         | 1.06 |
| 1.07                    | DEPRECIATION PRO BLDG SOUTH                        | 36,460,909                  | 0                           | 36,460,909                               | 0.014722                    | 0         | 1.07 |
| 1.08                    | DEPRECIATION WOOD ST                               | 6,077,047                   | 0                           | 6,077,047                                | 0.002454                    | 0         | 1.08 |
| 1.09                    | DEPRECIATION ACADEMIC FACILITY                     | 74,601,337                  | 0                           | 74,601,337                               | 0.030122                    | 0         | 1.09 |
| 1.10                    | DEPRECIATION PRO BLDG III                          | 59,595,546                  | 0                           | 59,595,546                               | 0.024063                    | 0         | 1.10 |
| 1.11                    | DEPRECIATION JRB                                   | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 1.11 |
| 1.12                    | DEPRECIATION TOB                                   | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 1.12 |
| 1.13                    | DEPRECIATION EQUIPMENT                             | 757,200,658                 | 0                           | 757,200,658                              | 0.305742                    | 0         | 1.13 |
| 1.14                    | DEPRECIATION ORTHOPEDICS                           | 20,951,718                  | 0                           | 20,951,718                               | 0.008460                    | 0         | 1.14 |
| 1.15                    | DEPRECIATION KIDSTON                               | 5,144,076                   | 0                           | 5,144,076                                | 0.002077                    | 0         | 1.15 |
| 1.16                    | DEPRECIATION COHN                                  | 67,885,709                  | 0                           | 67,885,709                               | 0.027411                    | 0         | 1.16 |
| 1.17                    | DEPRECIATION TOWER                                 | 569,411,421                 | 0                           | 569,411,421                              | 0.229917                    | 0         | 1.17 |
| 2.00                    | CAP REL COSTS-MVBLE EQUIP                          | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 2.00 |
| 2.01                    | INTEREST GENERAL                                   | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 2.01 |
| 2.02                    | INTEREST DIRECT BLDG                               | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 2.02 |
| 2.03                    | INTEREST ATRUM PAV                                 | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 2.03 |
| 2.04                    | INTEREST PRO BLDG SOUTH                            | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 2.04 |
| 2.05                    | INTEREST TOB                                       | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 2.05 |
| 2.06                    | INTEREST PRO BLDG III                              | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 2.06 |
| 2.07                    | INTEREST TOWER                                     | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 2.07 |
| 2.08                    | INTEREST PRO BLDG NORTH                            | 0                           | 0                           | 0                                        | 0.000000                    | 0         | 2.08 |
| 3.00                    | Total (sum of lines 1-2)                           | 2,476,600,496               | 0                           | 2,476,600,496                            | 1.000000                    | 0         | 3.00 |
| Cost Center Description |                                                    | ALLOCATION OF OTHER CAPITAL |                             |                                          | SUMMARY OF CAPITAL          |           |      |
|                         |                                                    | Taxes                       | Other Capital-Related Costs | Total (sum of cols. 5 through 7)         | Depreciation                | Lease     |      |
|                         |                                                    | 6.00                        | 7.00                        | 8.00                                     | 9.00                        | 10.00     |      |
|                         | PART III - RECONCILIATION OF CAPITAL COSTS CENTERS |                             |                             |                                          |                             |           |      |
| 1.00                    | CAP REL COSTS-BLDG & FIXT                          | 0                           | 0                           | 0                                        | 0                           | 0         | 1.00 |
| 1.01                    | DEPRECIATION OLD HOSPITAL                          | 0                           | 0                           | 0                                        | 1,219,128                   | 0         | 1.01 |
| 1.02                    | DEPRECIATION DIRECT BLDG                           | 0                           | 0                           | 0                                        | 6,343,920                   | 0         | 1.02 |
| 1.03                    | DEPRECIATION KELLOGG PAV                           | 0                           | 0                           | 0                                        | 4,696,203                   | 0         | 1.03 |
| 1.04                    | DEPRECIATION JELKE SOUTH                           | 0                           | 0                           | 0                                        | 5,496,718                   | 0         | 1.04 |
| 1.05                    | DEPRECIATION ATRIUM PAV                            | 0                           | 0                           | 0                                        | 7,477,816                   | 0         | 1.05 |
| 1.06                    | DEPRECIATION PRO BLDG NORTH                        | 0                           | 0                           | 0                                        | 1,335,586                   | 0         | 1.06 |
| 1.07                    | DEPRECIATION PRO BLDG SOUTH                        | 0                           | 0                           | 0                                        | 866,827                     | 0         | 1.07 |
| 1.08                    | DEPRECIATION WOOD ST                               | 0                           | 0                           | 0                                        | 346,213                     | 0         | 1.08 |
| 1.09                    | DEPRECIATION ACADEMIC FACILITY                     | 0                           | 0                           | 0                                        | 804,422                     | 0         | 1.09 |
| 1.10                    | DEPRECIATION PRO BLDG III                          | 0                           | 0                           | 0                                        | 1,606,287                   | 0         | 1.10 |
| 1.11                    | DEPRECIATION JRB                                   | 0                           | 0                           | 0                                        | 718,836                     | 0         | 1.11 |
| 1.12                    | DEPRECIATION TOB                                   | 0                           | 0                           | 0                                        | 0                           | 0         | 1.12 |
| 1.13                    | DEPRECIATION EQUIPMENT                             | 0                           | 0                           | 0                                        | 49,982,252                  | 0         | 1.13 |
| 1.14                    | DEPRECIATION ORTHOPEDICS                           | 0                           | 0                           | 0                                        | 551,534                     | 0         | 1.14 |
| 1.15                    | DEPRECIATION KIDSTON                               | 0                           | 0                           | 0                                        | 31,147                      | 0         | 1.15 |
| 1.16                    | DEPRECIATION COHN                                  | 0                           | 0                           | 0                                        | 1,410,661                   | 0         | 1.16 |
| 1.17                    | DEPRECIATION TOWER                                 | 0                           | 0                           | 0                                        | 17,971,484                  | 0         | 1.17 |
| 2.00                    | CAP REL COSTS-MVBLE EQUIP                          | 0                           | 0                           | 0                                        | 0                           | 0         | 2.00 |
| 2.01                    | INTEREST GENERAL                                   | 0                           | 0                           | 0                                        | 0                           | 0         | 2.01 |
| 2.02                    | INTEREST DIRECT BLDG                               | 0                           | 0                           | 0                                        | 0                           | 0         | 2.02 |
| 2.03                    | INTEREST ATRUM PAV                                 | 0                           | 0                           | 0                                        | 0                           | 0         | 2.03 |
| 2.04                    | INTEREST PRO BLDG SOUTH                            | 0                           | 0                           | 0                                        | 0                           | 0         | 2.04 |
| 2.05                    | INTEREST TOB                                       | 0                           | 0                           | 0                                        | 0                           | 0         | 2.05 |
| 2.06                    | INTEREST PRO BLDG III                              | 0                           | 0                           | 0                                        | 0                           | 0         | 2.06 |
| 2.07                    | INTEREST TOWER                                     | 0                           | 0                           | 0                                        | 0                           | 0         | 2.07 |
| 2.08                    | INTEREST PRO BLDG NORTH                            | 0                           | 0                           | 0                                        | 0                           | 0         | 2.08 |
| 3.00                    | Total (sum of lines 1-2)                           | 0                           | 0                           | 0                                        | 100,859,034                 | 0         | 3.00 |

## RECONCILIATION OF CAPITAL COSTS CENTERS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet A-7  
Part III  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                            |                                | SUMMARY OF CAPITAL |                              |                          |                                                |                                       |      |
|----------------------------------------------------|--------------------------------|--------------------|------------------------------|--------------------------|------------------------------------------------|---------------------------------------|------|
|                                                    |                                | Interest           | Insurance (see instructions) | Taxes (see instructions) | Other Capital-Related Costs (see instructions) | Total (2) (sum of cols. 9 through 14) |      |
|                                                    |                                | 11.00              | 12.00                        | 13.00                    | 14.00                                          | 15.00                                 |      |
| PART III - RECONCILIATION OF CAPITAL COSTS CENTERS |                                |                    |                              |                          |                                                |                                       |      |
| 1.00                                               | CAP REL COSTS-BLDG & FIXT      | 0                  | 0                            | 0                        | 0                                              | 0                                     | 1.00 |
| 1.01                                               | DEPRECIATION OLD HOSPITAL      | 0                  | 0                            | 0                        | 0                                              | 1,219,128                             | 1.01 |
| 1.02                                               | DEPRECIATION DIRECT BLDG       | 0                  | 0                            | 0                        | 0                                              | 6,343,920                             | 1.02 |
| 1.03                                               | DEPRECIATION KELLOGG PAV       | 0                  | 0                            | 0                        | 0                                              | 4,696,203                             | 1.03 |
| 1.04                                               | DEPRECIATION JELKE SOUTH       | 0                  | 0                            | 0                        | 0                                              | 5,496,718                             | 1.04 |
| 1.05                                               | DEPRECIATION ATRIUM PAV        | 0                  | 0                            | 0                        | 0                                              | 7,477,816                             | 1.05 |
| 1.06                                               | DEPRECIATION PRO BLDG NORTH    | 0                  | 0                            | 0                        | 0                                              | 1,335,586                             | 1.06 |
| 1.07                                               | DEPRECIATION PRO BLDG SOUTH    | 0                  | 0                            | 0                        | 0                                              | 866,827                               | 1.07 |
| 1.08                                               | DEPRECIATION WOOD ST           | 0                  | 0                            | 0                        | 0                                              | 346,213                               | 1.08 |
| 1.09                                               | DEPRECIATION ACADEMIC FACILITY | 0                  | 0                            | 0                        | 0                                              | 804,422                               | 1.09 |
| 1.10                                               | DEPRECIATION PRO BLDG III      | 0                  | 0                            | 0                        | 0                                              | 1,606,287                             | 1.10 |
| 1.11                                               | DEPRECIATION JRB               | 0                  | 0                            | 0                        | 0                                              | 718,836                               | 1.11 |
| 1.12                                               | DEPRECIATION TOB               | 0                  | 0                            | 0                        | 0                                              | 0                                     | 1.12 |
| 1.13                                               | DEPRECIATION EQUIPMENT         | 0                  | 0                            | 0                        | 0                                              | 49,982,252                            | 1.13 |
| 1.14                                               | DEPRECIATION ORTHOPEDICS       | 0                  | 0                            | 0                        | 0                                              | 551,534                               | 1.14 |
| 1.15                                               | DEPRECIATION KIDSTON           | 0                  | 0                            | 0                        | 0                                              | 31,147                                | 1.15 |
| 1.16                                               | DEPRECIATION COHN              | 0                  | 0                            | 0                        | 0                                              | 1,410,661                             | 1.16 |
| 1.17                                               | DEPRECIATION TOWER             | 0                  | 0                            | 0                        | 0                                              | 17,971,484                            | 1.17 |
| 2.00                                               | CAP REL COSTS-MVBLE EQUIP      | 0                  | 0                            | 0                        | 0                                              | 0                                     | 2.00 |
| 2.01                                               | INTEREST GENERAL               | 0                  | 0                            | 0                        | 0                                              | 0                                     | 2.01 |
| 2.02                                               | INTEREST DIRECT BLDG           | 0                  | 0                            | 0                        | 0                                              | 0                                     | 2.02 |
| 2.03                                               | INTEREST ATRUM PAV             | 0                  | 0                            | 0                        | 0                                              | 0                                     | 2.03 |
| 2.04                                               | INTEREST PRO BLDG SOUTH        | 0                  | 0                            | 0                        | 0                                              | 0                                     | 2.04 |
| 2.05                                               | INTEREST TOB                   | 0                  | 0                            | 0                        | 0                                              | 0                                     | 2.05 |
| 2.06                                               | INTEREST PRO BLDG III          | 0                  | 0                            | 0                        | 0                                              | 0                                     | 2.06 |
| 2.07                                               | INTEREST TOWER                 | 0                  | 0                            | 0                        | 0                                              | 0                                     | 2.07 |
| 2.08                                               | INTEREST PRO BLDG NORTH        | 0                  | 0                            | 0                        | 0                                              | 0                                     | 2.08 |
| 3.00                                               | Total (sum of lines 1-2)       | 0                  | 0                            | 0                        | 0                                              | 100,859,034                           | 3.00 |

## ADJUSTMENTS TO EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                                                                | Basis/Code (2) | Amount | Expense Classification on Worksheet A<br>To/From Which the Amount is to be Adjusted |        | Wkst. A-7 Ref. |      |
|-------------------------|----------------------------------------------------------------|----------------|--------|-------------------------------------------------------------------------------------|--------|----------------|------|
|                         |                                                                |                |        | Cost Center                                                                         | Line # |                |      |
|                         |                                                                |                |        |                                                                                     |        |                |      |
| 1.00                    | Investment income - CAP REL COSTS-BLDG & FIXT (chapter 2)      |                |        | 0CAP REL COSTS-BLDG & FIXT                                                          | 1.00   | 0              | 1.00 |
| 1.01                    | Investment income - DEPRECIATION OLD HOSPITAL (chapter 2)      |                |        | 0DEPRECIATION OLD HOSPITAL                                                          | 1.01   | 0              | 1.01 |
| 1.02                    | Investment income - DEPRECIATION DIRECT BLDG (chapter 2)       |                |        | 0DEPRECIATION DIRECT BLDG                                                           | 1.02   | 0              | 1.02 |
| 1.03                    | Investment income - DEPRECIATION KELLOGG PAV (chapter 2)       |                |        | 0DEPRECIATION KELLOGG PAV                                                           | 1.03   | 0              | 1.03 |
| 1.04                    | Investment income - DEPRECIATION JELKE SOUTH (chapter 2)       |                |        | 0DEPRECIATION JELKE SOUTH                                                           | 1.04   | 0              | 1.04 |
| 1.05                    | Investment income - DEPRECIATION ATRIUM PAV (chapter 2)        |                |        | 0DEPRECIATION ATRIUM PAV                                                            | 1.05   | 0              | 1.05 |
| 1.06                    | Investment income - DEPRECIATION PRO BLDG NORTH (chapter 2)    |                |        | 0DEPRECIATION PRO BLDG NORTH                                                        | 1.06   | 0              | 1.06 |
| 1.07                    | Investment income - DEPRECIATION PRO BLDG SOUTH (chapter 2)    |                |        | 0DEPRECIATION PRO BLDG SOUTH                                                        | 1.07   | 0              | 1.07 |
| 1.08                    | Investment income - DEPRECIATION WOOD ST (chapter 2)           |                |        | 0DEPRECIATION WOOD ST                                                               | 1.08   | 0              | 1.08 |
| 1.09                    | Investment income - DEPRECIATION ACADEMIC FACILITY (chapter 2) |                |        | 0DEPRECIATION ACADEMIC FACILITY                                                     | 1.09   | 0              | 1.09 |
| 1.10                    | Investment income - DEPRECIATION PRO BLDG III (chapter 2)      |                |        | 0DEPRECIATION PRO BLDG III                                                          | 1.10   | 0              | 1.10 |
| 1.11                    | Investment income - DEPRECIATION JRB (chapter 2)               |                |        | 0DEPRECIATION JRB                                                                   | 1.11   | 0              | 1.11 |
| 1.12                    | Investment income - DEPRECIATION TOB (chapter 2)               |                |        | 0DEPRECIATION TOB                                                                   | 1.12   | 0              | 1.12 |
| 1.13                    | Investment income - DEPRECIATION EQUIPMENT (chapter 2)         |                |        | 0DEPRECIATION EQUIPMENT                                                             | 1.13   | 0              | 1.13 |
| 1.14                    | Investment income - DEPRECIATION ORTHOPEDICS (chapter 2)       |                |        | 0DEPRECIATION ORTHOPEDICS                                                           | 1.14   | 0              | 1.14 |
| 1.15                    | Investment income - DEPRECIATION KIDSTON (chapter 2)           |                |        | 0DEPRECIATION KIDSTON                                                               | 1.15   | 0              | 1.15 |
| 1.16                    | Investment income - DEPRECIATION COHN (chapter 2)              |                |        | 0DEPRECIATION COHN                                                                  | 1.16   | 0              | 1.16 |
| 1.17                    | Investment income - DEPRECIATION TOWER (chapter 2)             |                |        | 0DEPRECIATION TOWER                                                                 | 1.17   | 0              | 1.17 |
| 2.00                    | Investment income - CAP REL COSTS-MVBLE EQUIP (chapter 2)      |                |        | 0CAP REL COSTS-MVBLE EQUIP                                                          | 2.00   | 0              | 2.00 |
| 2.01                    | Investment income - INTEREST GENERAL (chapter 2)               |                |        | 0INTEREST GENERAL                                                                   | 2.01   | 0              | 2.01 |
| 2.02                    | Investment income - INTEREST DIRECT BLDG (chapter 2)           |                |        | 0INTEREST DIRECT BLDG                                                               | 2.02   | 0              | 2.02 |
| 2.03                    | Investment income - INTEREST ATRUM PAV (chapter 2)             |                |        | 0INTEREST ATRUM PAV                                                                 | 2.03   | 0              | 2.03 |
| 2.04                    | Investment income - INTEREST PRO BLDG SOUTH (chapter 2)        |                |        | 0INTEREST PRO BLDG SOUTH                                                            | 2.04   | 0              | 2.04 |
| 2.05                    | Investment income - INTEREST TOB (chapter 2)                   |                |        | 0INTEREST TOB                                                                       | 2.05   | 0              | 2.05 |
| 2.06                    | Investment income - INTEREST PRO BLDG III (chapter 2)          |                |        | 0INTEREST PRO BLDG III                                                              | 2.06   | 0              | 2.06 |
| 2.07                    | Investment income - INTEREST TOWER (chapter 2)                 |                |        | 0INTEREST TOWER                                                                     | 2.07   | 0              | 2.07 |
| 2.08                    | Investment income - INTEREST PRO BLDG NORTH (chapter 2)        |                |        | 0INTEREST PRO BLDG NORTH                                                            | 2.08   | 0              | 2.08 |
| 3.00                    | Investment income - other (chapter 2)                          |                |        | 0                                                                                   | 0.00   | 0              | 3.00 |
| 4.00                    | Trade, quantity, and time discounts (chapter 8)                |                |        | 0                                                                                   | 0.00   | 0              | 4.00 |

## ADJUSTMENTS TO EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                                                                                         | Basis/Code (2) | Amount     | Expense Classification on Worksheet A<br>To/From Which the Amount is to be Adjusted |        | Wkst. A-7 Ref. |       |
|-------------------------|-----------------------------------------------------------------------------------------|----------------|------------|-------------------------------------------------------------------------------------|--------|----------------|-------|
|                         |                                                                                         |                |            | Cost Center                                                                         | Line # |                |       |
|                         |                                                                                         | 1.00           | 2.00       | 3.00                                                                                | 4.00   | 5.00           |       |
| 5.00                    | Refunds and rebates of expenses (chapter 8)                                             |                | 0          |                                                                                     | 0.00   | 0              | 5.00  |
| 6.00                    | Rental of provider space by suppliers (chapter 8)                                       |                | 0          |                                                                                     | 0.00   | 0              | 6.00  |
| 7.00                    | Telephone services (pay stations excluded) (chapter 21)                                 |                | 0          |                                                                                     | 0.00   | 0              | 7.00  |
| 8.00                    | Television and radio service (chapter 21)                                               | A              | -98,007    | MAINTENANCE & REPAIRS                                                               | 6.00   | 0              | 8.00  |
| 9.00                    | Parking lot (chapter 21)                                                                |                | 0          |                                                                                     | 0.00   | 0              | 9.00  |
| 10.00                   | Provider-based physician adjustment                                                     | A-8-2          | -7,121,010 |                                                                                     |        | 0              | 10.00 |
| 11.00                   | Sale of scrap, waste, etc. (chapter 23)                                                 |                | 0          |                                                                                     | 0.00   | 0              | 11.00 |
| 12.00                   | Related organization transactions (chapter 10)                                          | A-8-1          | 242,516    |                                                                                     |        | 0              | 12.00 |
| 13.00                   | Laundry and linen service                                                               |                | 0          |                                                                                     | 0.00   | 0              | 13.00 |
| 14.00                   | Cafeteria-employees and guests                                                          |                | 0          |                                                                                     | 0.00   | 0              | 14.00 |
| 15.00                   | Rental of quarters to employee and others                                               |                | 0          |                                                                                     | 0.00   | 0              | 15.00 |
| 16.00                   | Sale of medical and surgical supplies to other than patients                            |                | 0          |                                                                                     | 0.00   | 0              | 16.00 |
| 17.00                   | Sale of drugs to other than patients                                                    | B              | -352,096   | DRUGS CHARGED TO PATIENTS                                                           | 73.00  | 0              | 17.00 |
| 18.00                   | Sale of medical records and abstracts                                                   | B              | -35,792    | MEDICAL RECORDS & LIBRARY                                                           | 16.01  | 0              | 18.00 |
| 19.00                   | Nursing and allied health education (tuition, fees, books, etc.)                        |                | 0          |                                                                                     | 0.00   | 0              | 19.00 |
| 20.00                   | Vending machines                                                                        |                | 0          |                                                                                     | 0.00   | 0              | 20.00 |
| 21.00                   | Income from imposition of interest, finance or penalty charges (chapter 21)             |                | 0          |                                                                                     | 0.00   | 0              | 21.00 |
| 22.00                   | Interest expense on Medicare overpayments and borrowings to repay Medicare overpayments |                | 0          |                                                                                     | 0.00   | 0              | 22.00 |
| 23.00                   | Adjustment for respiratory therapy costs in excess of limitation (chapter 14)           | A-8-3          | 0          | RESPIRATORY THERAPY                                                                 | 65.00  |                | 23.00 |
| 24.00                   | Adjustment for physical therapy costs in excess of limitation (chapter 14)              | A-8-3          | 0          | PHYSICAL THERAPY                                                                    | 66.00  |                | 24.00 |
| 25.00                   | Utilization review - physicians' compensation (chapter 21)                              |                | 0          | UTILIZATION REVIEW - SNF                                                            | 114.00 |                | 25.00 |
| 26.00                   | Depreciation - CAP REL COSTS-BLDG & FIXT                                                |                | 0          | CAP REL COSTS-BLDG & FIXT                                                           | 1.00   | 0              | 26.00 |
| 26.01                   | Depreciation - DEPRECIATION OLD HOSPITAL                                                |                | 0          | DEPRECIATION OLD HOSPITAL                                                           | 1.01   | 0              | 26.01 |
| 26.02                   | Depreciation - DEPRECIATION DIRECT BLDG                                                 |                | 0          | DEPRECIATION DIRECT BLDG                                                            | 1.02   | 0              | 26.02 |
| 26.03                   | Depreciation - DEPRECIATION KELLOGG PAV                                                 |                | 0          | DEPRECIATION KELLOGG PAV                                                            | 1.03   | 0              | 26.03 |
| 26.04                   | Depreciation - DEPRECIATION JELKE SOUTH                                                 |                | 0          | DEPRECIATION JELKE SOUTH                                                            | 1.04   | 0              | 26.04 |
| 26.05                   | Depreciation - DEPRECIATION ATRIUM PAV                                                  |                | 0          | DEPRECIATION ATRIUM PAV                                                             | 1.05   | 0              | 26.05 |
| 26.06                   | Depreciation - DEPRECIATION PRO BLDG NORTH                                              |                | 0          | DEPRECIATION PRO BLDG NORTH                                                         | 1.06   | 0              | 26.06 |
| 26.07                   | Depreciation - DEPRECIATION PRO BLDG SOUTH                                              |                | 0          | DEPRECIATION PRO BLDG SOUTH                                                         | 1.07   | 0              | 26.07 |
| 26.08                   | Depreciation - DEPRECIATION WOOD ST                                                     |                | 0          | DEPRECIATION WOOD ST                                                                | 1.08   | 0              | 26.08 |
| 26.09                   | Depreciation - DEPRECIATION ACADEMIC FACILITY                                           |                | 0          | DEPRECIATION ACADEMIC FACILITY                                                      | 1.09   | 0              | 26.09 |
| 26.10                   | Depreciation - DEPRECIATION PRO BLDG III                                                |                | 0          | DEPRECIATION PRO BLDG III                                                           | 1.10   | 0              | 26.10 |
| 26.11                   | Depreciation - DEPRECIATION JRB                                                         |                | 0          | DEPRECIATION JRB                                                                    | 1.11   | 0              | 26.11 |

## ADJUSTMENTS TO EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                                                                                | Basis/Code (2) | Amount      | Expense Classification on Worksheet A<br>To/From Which the Amount is to be Adjusted |        | Wkst. A-7 Ref. |       |
|-------------------------|--------------------------------------------------------------------------------|----------------|-------------|-------------------------------------------------------------------------------------|--------|----------------|-------|
|                         |                                                                                |                |             | Cost Center                                                                         | Line # |                |       |
|                         |                                                                                | 1.00           | 2.00        | 3.00                                                                                | 4.00   | 5.00           |       |
| 26.12                   | Depreciation - DEPRECIATION TOB                                                |                |             | 0 DEPRECIATION TOB                                                                  | 1.12   | 0              | 26.12 |
| 26.13                   | Depreciation - DEPRECIATION EQUIPMENT                                          |                |             | 0 DEPRECIATION EQUIPMENT                                                            | 1.13   | 0              | 26.13 |
| 26.14                   | Depreciation - DEPRECIATION ORTHOPEDICS                                        |                |             | 0 DEPRECIATION ORTHOPEDICS                                                          | 1.14   | 0              | 26.14 |
| 26.15                   | Depreciation - DEPRECIATION KIDSTON                                            |                |             | 0 DEPRECIATION KIDSTON                                                              | 1.15   | 0              | 26.15 |
| 26.16                   | Depreciation - DEPRECIATION COHN                                               |                |             | 0 DEPRECIATION COHN                                                                 | 1.16   | 0              | 26.16 |
| 26.17                   | Depreciation - DEPRECIATION TOWER                                              |                |             | 0 DEPRECIATION TOWER                                                                | 1.17   | 0              | 26.17 |
| 27.00                   | Depreciation - CAP REL COSTS-MVBLE EQUIP                                       |                |             | 0 CAP REL COSTS-MVBLE EQUIP                                                         | 2.00   | 0              | 27.00 |
| 27.01                   | Depreciation - INTEREST GENERAL                                                |                |             | 0 INTEREST GENERAL                                                                  | 2.01   | 0              | 27.01 |
| 27.02                   | Depreciation - INTEREST DIRECT BLDG                                            |                |             | 0 INTEREST DIRECT BLDG                                                              | 2.02   | 0              | 27.02 |
| 27.03                   | Depreciation - INTEREST ATRUM PAV                                              |                |             | 0 INTEREST ATRUM PAV                                                                | 2.03   | 0              | 27.03 |
| 27.04                   | Depreciation - INTEREST PRO BLDG SOUTH                                         |                |             | 0 INTEREST PRO BLDG SOUTH                                                           | 2.04   | 0              | 27.04 |
| 27.05                   | Depreciation - INTEREST TOB                                                    |                |             | 0 INTEREST TOB                                                                      | 2.05   | 0              | 27.05 |
| 27.06                   | Depreciation - INTEREST PRO BLDG III                                           |                |             | 0 INTEREST PRO BLDG III                                                             | 2.06   | 0              | 27.06 |
| 27.07                   | Depreciation - INTEREST TOWER                                                  |                |             | 0 INTEREST TOWER                                                                    | 2.07   | 0              | 27.07 |
| 27.08                   | Depreciation - INTEREST PRO BLDG NORTH                                         |                |             | 0 INTEREST PRO BLDG NORTH                                                           | 2.08   | 0              | 27.08 |
| 28.00                   | Non-physician Anesthetist                                                      | A              | -3,666,678  | NONPHYSICIAN ANESTHETISTS                                                           | 19.00  |                | 28.00 |
| 29.00                   | Physicians' assistant                                                          |                | 0           |                                                                                     | 0.00   | 0              | 29.00 |
| 30.00                   | Adjustment for occupational therapy costs in excess of limitation (chapter 14) | A-8-3          |             | 0 OCCUPATIONAL THERAPY                                                              | 67.00  |                | 30.00 |
| 30.99                   | Hospice (non-distinct) (see instructions)                                      |                |             | 0 ADULTS & PEDIATRICS                                                               | 30.00  |                | 30.99 |
| 31.00                   | Adjustment for speech pathology costs in excess of limitation (chapter 14)     | A-8-3          |             | 0 SPEECH PATHOLOGY                                                                  | 68.00  |                | 31.00 |
| 32.00                   | CAH HIT Adjustment for Depreciation and Interest                               |                | 0           |                                                                                     | 0.00   | 0              | 32.00 |
| 33.00                   | TELEPHONE                                                                      | A              | -57,976     | DEPRECIATION EQUIPMENT                                                              | 1.13   | 9              | 33.00 |
| 33.01                   | TELEPHONE                                                                      | A              | -13,250     | CORPORATE ADMINISTRATION                                                            | 5.11   | 0              | 33.01 |
| 33.02                   | TELEPHONE                                                                      | A              | -1,600,979  | ADMIN & GEN PT SERVICE                                                              | 5.07   | 0              | 33.02 |
| 33.10                   | EMPLOYEE ALLOWANCE                                                             | A              | -181,976    | EMPLOYEE BENEFITS DEPARTMENT                                                        | 4.00   | 0              | 33.10 |
| 33.20                   | UNEMPLOYMENT COMP                                                              | A              | 351,946     | EMPLOYEE BENEFITS DEPARTMENT                                                        | 4.00   | 0              | 33.20 |
| 33.50                   | UNALLOWABLE COSTS                                                              | A              | -13,034,014 | CORPORATE ADMINISTRATION                                                            | 5.11   | 0              | 33.50 |
| 33.60                   | MALPRACTICE TRUST INCOME                                                       | B              | -5,731,204  | CORPORATE ADMINISTRATION                                                            | 5.11   | 0              | 33.60 |
| 33.70                   | STRATEGIC SUPPORT SUBSIDIES                                                    | A              | -65,701,585 | TRANSITION RECRUITMENT                                                              | 5.01   | 0              | 33.70 |
| 33.90                   | INTEREST INCOME                                                                | B              | -2,175,108  | INTEREST GENERAL                                                                    | 2.01   | 11             | 33.90 |
| 33.91                   | INTEREST INCOME                                                                | B              | -1,814,631  | INTEREST DIRECT BLDG                                                                | 2.02   | 11             | 33.91 |
| 33.92                   | INTEREST INCOME                                                                | B              | -2,822,386  | INTEREST ATRUM PAV                                                                  | 2.03   | 11             | 33.92 |
| 33.93                   | INTEREST INCOME                                                                | B              | -343,813    | INTEREST PRO BLDG SOUTH                                                             | 2.04   | 11             | 33.93 |
| 33.94                   | INTEREST INCOME                                                                | B              | -599,566    | INTEREST TOB                                                                        | 2.05   | 11             | 33.94 |
| 33.95                   | INTEREST INCOME                                                                | B              | -16,073     | INTEREST PRO BLDG III                                                               | 2.06   | 11             | 33.95 |
| 33.96                   | INTEREST INCOME                                                                | B              | -8,684,970  | INTEREST TOWER                                                                      | 2.07   | 11             | 33.96 |
| 33.97                   | INTEREST INCOME                                                                | B              | -103,422    | INTEREST PRO BLDG NORTH                                                             | 2.08   | 11             | 33.97 |
| 34.00                   | GAIN OR LOSS ON SALE OF EQUIPMENT                                              | B              | 10,272      | DEPRECIATION EQUIPMENT                                                              | 1.13   | 9              | 34.00 |
| 34.05                   | MEDICAID PROVIDER TAX                                                          | A              | -40,166,856 | CORPORATE ADMINISTRATION                                                            | 5.11   | 0              | 34.05 |
| 34.10                   | POST RETIREMENT INCOME                                                         | A              | 63,260      | EMPLOYEE BENEFITS DEPARTMENT                                                        | 4.00   | 0              | 34.10 |
| 34.11                   | PENSION                                                                        | A              | -4,237,649  | EMPLOYEE BENEFITS DEPARTMENT                                                        | 4.00   | 0              | 34.11 |
| 34.15                   | PASTORAL CARE RESIDENTS                                                        | B              | -3,375      | PARAMED PASTORAL CARE                                                               | 23.06  | 0              | 34.15 |
| 34.16                   | PHARMACY RESIDENTS                                                             | B              | -21,000     | PARAMED PHARMACY                                                                    | 23.09  | 0              | 34.16 |
| 34.20                   | SALE OF SCRAP                                                                  | B              | -882,291    | ADMIN & GEN PT SERVICE                                                              | 5.07   | 0              | 34.20 |
| 34.21                   | SALE OF SCRAP                                                                  | B              | -234,533    | CORPORATE ADMINISTRATION                                                            | 5.11   | 0              | 34.21 |
| 34.25                   | BUS REVENUE                                                                    | B              | -77,426     | EMPLOYEE BENEFITS DEPARTMENT                                                        | 4.00   | 0              | 34.25 |
| 34.26                   | FITNESS CENTER                                                                 | B              | -488,493    | EMPLOYEE BENEFITS DEPARTMENT                                                        | 4.00   | 0              | 34.26 |
| 35.00                   | BUS REVENUE                                                                    | B              | -27,300     | LABORATORY                                                                          | 60.00  | 0              | 35.00 |
| 35.01                   | MISC INCOME                                                                    | B              | -16,284     | RADIOLOGY-DIAGNOSTIC                                                                | 54.00  | 0              | 35.01 |
| 35.02                   | MISC INCOME                                                                    | B              | -425        | PHYSICAL THERAPY                                                                    | 66.00  | 0              | 35.02 |

## ADJUSTMENTS TO EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |             | Basis/Code (2) | Amount      | Expense Classification on Worksheet A      |        | Wkst. A-7 Ref. |       |
|-------------------------|-------------|----------------|-------------|--------------------------------------------|--------|----------------|-------|
|                         |             |                |             | To/From Which the Amount is to be Adjusted |        |                |       |
|                         |             |                |             | Cost Center                                | Line # |                |       |
|                         |             | 1.00           | 2.00        | 3.00                                       | 4.00   | 5.00           |       |
| 35.03                   | MISC INCOME | B              | 542         | LABORATORY                                 | 60.00  | 0              | 35.03 |
| 35.04                   | MISC INCOME | B              | -1,624      | PEDIATRIC INTENSIVE CARE UNIT              | 35.01  | 0              | 35.04 |
| 35.05                   | MISC INCOME | B              | -16,005     | PREMATURE INTENSIVE CARE UNIT              | 35.02  | 0              | 35.05 |
| 35.06                   | MISC INCOME | B              | -39,228     | NURSING ADMINISTRATION                     | 13.00  | 0              | 35.06 |
| 35.07                   | MISC INCOME | B              | 289         | NURSING ADMINISTRATION                     | 13.00  | 0              | 35.07 |
| 35.08                   | MISC INCOME | B              | -279,913    | NURSING ADMINISTRATION                     | 13.00  | 0              | 35.08 |
| 35.09                   | MISC INCOME | B              | 19,869      | CLINIC                                     | 90.00  | 0              | 35.09 |
| 35.10                   | MISC INCOME | B              | -2,315      | LABORATORY                                 | 60.00  | 0              | 35.10 |
| 35.11                   | MISC INCOME | B              | -1,538      | LABORATORY                                 | 60.00  | 0              | 35.11 |
| 35.12                   | MISC INCOME | B              | -1,402,797  | LABORATORY                                 | 60.00  | 0              | 35.12 |
| 35.13                   | MISC INCOME | B              | 416         | LABORATORY                                 | 60.00  | 0              | 35.13 |
| 35.14                   | MISC INCOME | B              | -96,958     | LABORATORY                                 | 60.00  | 0              | 35.14 |
| 35.15                   | MISC INCOME | B              | -91,051     | LABORATORY                                 | 60.00  | 0              | 35.15 |
| 35.16                   | MISC INCOME | B              | -84,128     | LABORATORY                                 | 60.00  | 0              | 35.16 |
| 35.17                   | MISC INCOME | B              | -117,558    | LABORATORY                                 | 60.00  | 0              | 35.17 |
| 35.18                   | MISC INCOME | B              | -81,919     | LABORATORY                                 | 60.00  | 0              | 35.18 |
| 35.19                   | MISC INCOME | B              | -2,408      | LABORATORY                                 | 60.00  | 0              | 35.19 |
| 35.20                   | MISC INCOME | B              | -9,000      | WHOLE BLOOD & PACKED RED BLOOD CELLS       | 62.00  | 0              | 35.20 |
| 35.21                   | MISC INCOME | B              | -72,454     | LABORATORY                                 | 60.00  | 0              | 35.21 |
| 35.22                   | MISC INCOME | B              | -27,328     | LABORATORY                                 | 60.00  | 0              | 35.22 |
| 35.23                   | MISC INCOME | B              | -8,489      | LABORATORY                                 | 60.00  | 0              | 35.23 |
| 35.24                   | MISC INCOME | B              | -2,983      | WHOLE BLOOD & PACKED RED BLOOD CELLS       | 62.00  | 0              | 35.24 |
| 35.25                   | MISC INCOME | B              | -269,422    | CLINIC                                     | 90.00  | 0              | 35.25 |
| 35.26                   | MISC INCOME | B              | -18,263     | PSYCH DAY HOSPITAL                         | 76.01  | 0              | 35.26 |
| 35.27                   | MISC INCOME | B              | 0           |                                            | 0.00   | 0              | 35.27 |
| 35.28                   | MISC INCOME | B              | 0           |                                            | 0.00   | 0              | 35.28 |
| 35.29                   | MISC INCOME | B              | 0           |                                            | 0.00   | 0              | 35.29 |
| 35.30                   | MISC INCOME | B              | 0           |                                            | 0.00   | 0              | 35.30 |
| 35.31                   | MISC INCOME | B              | 0           |                                            | 0.00   | 0              | 35.31 |
| 35.32                   | MISC INCOME | B              | -346,103    | I&R SERVICES-SALARY & FRINGES APPRVD       | 21.00  | 0              | 35.32 |
| 35.33                   | MISC INCOME | B              | 0           |                                            | 0.00   | 0              | 35.33 |
| 35.34                   | MISC INCOME | B              | -132,401    | I&R SERVICES-OTHER PRGM COSTS APPRVD       | 22.00  | 0              | 35.34 |
| 35.35                   | MISC INCOME | B              | -9,525      | I&R SERVICES-OTHER PRGM COSTS APPRVD       | 22.00  | 0              | 35.35 |
| 35.36                   | MISC INCOME | B              | -500        | I&R SERVICES-OTHER PRGM COSTS APPRVD       | 22.00  | 0              | 35.36 |
| 35.37                   | B-1 REVENUE | B              | -7,000      | PARAMED MEDICAL PHYSICS                    | 23.05  | 0              | 35.37 |
| 35.38                   | MISC INCOME | B              | -3,000      | CLINIC                                     | 90.00  | 0              | 35.38 |
| 35.39                   | MISC INCOME | B              | 123         | CLINIC                                     | 90.00  | 0              | 35.39 |
| 35.40                   | MISC INCOME | B              | -35,241     | CLINIC                                     | 90.00  | 0              | 35.40 |
| 35.41                   | MISC INCOME | B              | -598,322    | CORPORATE ADMINISTRATION                   | 5.11   | 0              | 35.41 |
| 35.42                   | MISC INCOME | B              | -2,318,793  | CORPORATE ADMINISTRATION                   | 5.11   | 0              | 35.42 |
| 35.43                   | MISC INCOME | B              | -8,113,325  | CORPORATE ADMINISTRATION                   | 5.11   | 0              | 35.43 |
| 35.44                   | MISC INCOME | B              | -8,486      | CORPORATE ADMINISTRATION                   | 5.11   | 0              | 35.44 |
| 35.45                   | MISC INCOME | B              | -145,000    | CORPORATE ADMINISTRATION                   | 5.11   | 0              | 35.45 |
| 35.46                   | MISC INCOME | B              | 70          | ADMIN & GEN PT SERVICE                     | 5.07   | 0              | 35.46 |
| 35.47                   | MISC INCOME | B              | -3,397      | ADMIN & GEN PT SERVICE                     | 5.07   | 0              | 35.47 |
| 35.48                   | MISC INCOME | B              | -2,358      | ADMIN & GEN INPT SERVICE                   | 5.04   | 0              | 35.48 |
| 35.49                   | MISC INCOME | B              | -53,135     | MAINTENANCE & REPAIRS                      | 6.00   | 0              | 35.49 |
| 35.50                   | MISC INCOME | B              | -17,474     | EMPLOYEE BENEFITS DEPARTMENT               | 4.00   | 0              | 35.50 |
| 35.51                   | MISC INCOME | B              | -512,441    | MAINTENANCE & REPAIRS                      | 6.00   | 0              | 35.51 |
| 35.52                   | MISC INCOME | B              | -287,062    | MAINTENANCE & REPAIRS                      | 6.00   | 0              | 35.52 |
| 35.53                   | MISC INCOME | B              | -733        | MAINTENANCE & REPAIRS                      | 6.00   | 0              | 35.53 |
| 35.54                   | MISC INCOME | B              | -44,750     | MAINTENANCE & REPAIRS                      | 6.00   | 0              | 35.54 |
| 35.55                   | MISC INCOME | B              | -74,354     | HOUSEKEEPING                               | 9.00   | 0              | 35.55 |
| 35.56                   | MISC INCOME | B              | 34,931      | SPEECH PATHOLOGY                           | 68.00  | 0              | 35.56 |
| 35.57                   | MISC INCOME | B              | -1,069      | ADULTS & PEDIATRICS                        | 30.00  | 0              | 35.57 |
| 35.58                   | MISC INCOME | B              | -1,071      | OPERATING ROOM                             | 50.00  | 0              | 35.58 |
| 36.00                   | B-1 REVENUE | B              | -1,278,244  | EMPLOYEE BENEFITS DEPARTMENT               | 4.00   | 0              | 36.00 |
| 36.01                   | B-1 REVENUE | B              | -13,746,981 | PARKING GARAGE                             | 5.02   | 0              | 36.01 |
| 36.02                   | B-1 REVENUE | B              | -57,418     | LAUNDRY & LINEN SERVICE                    | 8.00   | 0              | 36.02 |
| 36.03                   | B-1 REVENUE | B              | -1,475      | DIETARY                                    | 10.00  | 0              | 36.03 |
| 36.04                   | B-1 REVENUE | B              | -52,570     | PATIENT FOOD SERVICE                       | 10.01  | 0              | 36.04 |

## ADJUSTMENTS TO EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8

Date/Time Prepared:  
11/24/2019 4:22 pm

|                         |                                                                                     |   | Expense Classification on Worksheet A<br>To/From Which the Amount is to be Adjusted |              |                                         |        |
|-------------------------|-------------------------------------------------------------------------------------|---|-------------------------------------------------------------------------------------|--------------|-----------------------------------------|--------|
| Cost Center Description |                                                                                     |   | Basis/Code (2)                                                                      | Amount       | Cost Center                             | Line # |
|                         |                                                                                     |   | 1.00                                                                                | 2.00         | 3.00                                    | 4.00   |
|                         |                                                                                     |   |                                                                                     |              |                                         | 5.00   |
| 36.05                   | B-1 REVENUE                                                                         | B |                                                                                     | -2,303,049   | CAFETERIA                               | 11.00  |
| 36.06                   | B-1 REVENUE                                                                         | B |                                                                                     | -60          | MEDICAL RECORDS & LIBRARY               | 16.00  |
| 36.07                   | B-1 REVENUE                                                                         | B |                                                                                     | -192,572     | RUSH UNIVERSITY ADMIN SPLIT             | 18.14  |
| 36.08                   | B-1 REVENUE                                                                         | B |                                                                                     | -2,290       | CORPORATE ADMINISTRATION                | 5.11   |
| 36.09                   | B-1 REVENUE                                                                         | B |                                                                                     | -1,867,257   | PARAMED HEALTH SYSTEM<br>MANAGEMENT     | 23.00  |
| 36.10                   | B-1 REVENUE                                                                         | B |                                                                                     | -1,265,005   | PARAMED MEDICAL PERFUSION<br>TECH       | 23.01  |
| 36.11                   | B-1 REVENUE                                                                         | B |                                                                                     | -1,078,198   | PARAMED DIETARY                         | 23.02  |
| 36.12                   | B-1 REVENUE                                                                         | B |                                                                                     | -4,114,615   | PARAMED SPEECH                          | 23.03  |
| 36.13                   | B-1 REVENUE                                                                         | B |                                                                                     | -2,840,481   | PARAMED OCCUPATIONAL THERAPY            | 23.04  |
| 36.14                   | B-1 REVENUE                                                                         | B |                                                                                     | -1,807,813   | PARAMED TECHNOLOGY                      | 23.07  |
| 36.15                   | B-1 REVENUE                                                                         | B |                                                                                     | -752,242     | PARAMED VASCULAR ULTRASOUND             | 23.08  |
| 36.16                   | B-1 REVENUE                                                                         | B |                                                                                     | -726,564     | PARAMED RESPIRATORY THERAPY             | 23.10  |
| 36.17                   | B-1 REVENUE                                                                         | B |                                                                                     | -2,845,798   | PARAMED PHYSICIANS ASSISTANT            | 23.11  |
| 36.18                   | B-1 REVENUE                                                                         | B |                                                                                     | -28,087,874  | NURSING SCHOOL                          | 20.00  |
| 37.00                   | NR RECOVERIES                                                                       | B |                                                                                     | -87,752      | RESEARCH ADMINISTRATION                 | 5.03   |
| 37.01                   | NR RECOVERIES                                                                       | B |                                                                                     | -231,875     | ADMIN & GEN PT SERVICE                  | 5.07   |
| 37.02                   | NR RECOVERIES                                                                       | B |                                                                                     | -223,907     | RESEARCH FACULTY                        | 5.09   |
| 37.03                   | NR RECOVERIES                                                                       | B |                                                                                     | -68,538      | CORPORATE ADMINISTRATION                | 5.11   |
| 37.04                   | NR RECOVERIES                                                                       | B |                                                                                     | -135,516     | CLINICAL LAB ADMIN PED                  | 18.01  |
| 37.05                   | NR RECOVERIES                                                                       | B |                                                                                     | -187,238     | CLINICAL LAB ADMIN OB                   | 18.02  |
| 37.06                   | NR RECOVERIES                                                                       | B |                                                                                     | -929,097     | CLINICAL LAB ADMIN SURG                 | 18.03  |
| 37.07                   | NR RECOVERIES                                                                       | B |                                                                                     | -195,684     | CLINICAL LAB ADMIN PSYCH                | 18.04  |
| 37.08                   | NR RECOVERIES                                                                       | B |                                                                                     | -73,727      | CLINICAL LAB ADMIN PATH                 | 18.05  |
| 37.09                   | NR RECOVERIES                                                                       | B |                                                                                     | -191,179     | CLINICAL LAB ADMIN CARD                 | 18.06  |
| 37.10                   | NR RECOVERIES                                                                       | B |                                                                                     | -668,070     | CLINICAL LAB ADMIN NEUR                 | 18.08  |
| 37.11                   | NR RECOVERIES                                                                       | B |                                                                                     | -8,987,111   | DISCRETIONARY OPERATIONS                | 18.12  |
| 37.12                   | NR RECOVERIES                                                                       | B |                                                                                     | -354,328     | RUSH UNIVERSITY ADMIN SPLIT             | 18.14  |
| 37.13                   | NR RECOVERIES                                                                       | B |                                                                                     | -558,204     | I&R SERVICES-SALARY &<br>FRINGES APPRVD | 21.00  |
| 37.14                   | NR RECOVERIES                                                                       | B |                                                                                     | -204,392     | ANESTHESIOLOGY                          | 53.00  |
| 37.15                   | NR RECOVERIES                                                                       | B |                                                                                     | -838,715     | LABORATORY                              | 60.00  |
| 37.16                   | NR RECOVERIES                                                                       | B |                                                                                     | -356,479     | ELECTROCARDIOLOGY                       | 69.00  |
| 37.17                   | NR RECOVERIES                                                                       | B |                                                                                     | -27,898      | PSYCH DAY HOSPITAL                      | 76.01  |
| 37.18                   | NR RECOVERIES                                                                       | B |                                                                                     | -19,102      | EMERGENCY                               | 91.00  |
| 37.19                   | NR RECOVERIES                                                                       | B |                                                                                     | -131,146     | FUND RAISING                            | 190.01 |
| 37.20                   | NR RECOVERIES                                                                       | B |                                                                                     | 608,421      | MEDICAL COLLEGE                         | 194.00 |
| 38.00                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -30,786      | SURGICAL INTENSIVE CARE UNIT            | 34.00  |
| 38.01                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -28,371      | OPERATING ROOM                          | 50.00  |
| 38.02                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -3,458       | ANESTHESIOLOGY                          | 53.00  |
| 38.03                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -2,501       | RADIOLOGY-DIAGNOSTIC                    | 54.00  |
| 38.04                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -18,916      | LABORATORY                              | 60.00  |
| 38.05                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -988         | WHOLE BLOOD & PACKED RED<br>BLOOD CELLS | 62.00  |
| 38.06                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -234         | INTRAVENOUS THERAPY                     | 64.00  |
| 38.07                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -6,258       | RESPIRATORY THERAPY                     | 65.00  |
| 38.08                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -4,046       | ELECTROCARDIOLOGY                       | 69.00  |
| 38.09                   | OTHER ADJUSTMENTS (SPECIFY)<br>(3)                                                  |   |                                                                                     | 0            |                                         | 0.00   |
| 38.10                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -10,530      | DRUGS CHARGED TO PATIENTS               | 73.00  |
| 38.11                   | PROCUREMENT COSTS                                                                   | A |                                                                                     | -1,245       | RENAL DIALYSIS ADULT                    | 76.00  |
| 50.00                   | TOTAL (sum of lines 1 thru 49)<br>(Transfer to Worksheet A,<br>column 6, line 200.) |   |                                                                                     | -251,916,231 |                                         |        |

(1) Description - all chapter references in this column pertain to CMS Pub. 15-1.

(2) Basis for adjustment (see instructions).

A. Costs - if cost, including applicable overhead, can be determined.

B. Amount Received - if cost cannot be determined.

(3) Additional adjustments may be made on lines 33 thru 49 and subscripts thereof.

Note: See instructions for column 5 referencing to Worksheet A-7.

## STATEMENT OF COSTS OF SERVICES FROM RELATED ORGANIZATIONS AND HOME OFFICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8-1

Date/Time Prepared:  
11/24/2019 4:22 pm

|      | Line No.                                                                                                                        | Cost Center      | Expense Items    | Amount of Allowable Cost | Amount Included in wks. A, column 5 |      |
|------|---------------------------------------------------------------------------------------------------------------------------------|------------------|------------------|--------------------------|-------------------------------------|------|
|      | 1.00                                                                                                                            | 2.00             | 3.00             | 4.00                     | 5.00                                |      |
|      | A. COSTS INCURRED AND ADJUSTMENTS REQUIRED AS A RESULT OF TRANSACTIONS WITH RELATED ORGANIZATIONS OR CLAIMED HOME OFFICE COSTS: |                  |                  |                          |                                     |      |
| 1.00 | 1.11                                                                                                                            | DEPRECIATION JRB | DEPRECIATION JRB | 242,517                  | 1                                   | 1.00 |
| 2.00 | 0.00                                                                                                                            |                  |                  | 0                        | 0                                   | 2.00 |
| 3.00 | 0.00                                                                                                                            |                  |                  | 0                        | 0                                   | 3.00 |
| 4.00 | 0.00                                                                                                                            |                  |                  | 0                        | 0                                   | 4.00 |
| 5.00 | 0                                                                                                                               |                  | 0                | 242,517                  | 1                                   | 5.00 |

\* The amounts on lines 1-4 (and subscripts as appropriate) are transferred in detail to Worksheet A, column 6, lines as appropriate. Positive amounts increase cost and negative amounts decrease cost. For related organization or home office cost which has not been posted to Worksheet A, columns 1 and/or 2, the amount allowable should be indicated in column 4 of this part.

|  | Symbol (1)                                                          | Name | Percentage of Ownership | Name | Percentage of Ownership |  |
|--|---------------------------------------------------------------------|------|-------------------------|------|-------------------------|--|
|  | 1.00                                                                | 2.00 | 3.00                    | 4.00 | 5.00                    |  |
|  | B. INTERRELATIONSHIP TO RELATED ORGANIZATION(S) AND/OR HOME OFFICE: |      |                         |      |                         |  |

The Secretary, by virtue of the authority granted under section 1814(b)(1) of the Social Security Act, requires that you furnish the information requested under Part B of this worksheet.

This information is used by the Centers for Medicare and Medicaid Services and its intermediaries/contractors in determining that the costs applicable to services, facilities, and supplies furnished by organizations related to you by common ownership or control represent reasonable costs as determined under section 1861 of the Social Security Act. If you do not provide all or any part of the request information, the cost report is considered incomplete and not acceptable for purposes of claiming reimbursement under title XVIII.

|        |                                                |      |        |           |        |        |
|--------|------------------------------------------------|------|--------|-----------|--------|--------|
| 6.00   | C                                              | RUMC | 100.00 | JRB TRUST | 100.00 | 6.00   |
| 7.00   | C                                              | RUMC | 100.00 | ROOM 500  | 100.00 | 7.00   |
| 8.00   |                                                |      | 0.00   |           | 0.00   | 8.00   |
| 9.00   |                                                |      | 0.00   |           | 0.00   | 9.00   |
| 10.00  |                                                |      | 0.00   |           | 0.00   | 10.00  |
| 100.00 | G. Other (financial or non-financial) specify: |      |        |           |        | 100.00 |

(1) Use the following symbols to indicate interrelationship to related organizations:

- A. Individual has financial interest (stockholder, partner, etc.) in both related organization and in provider.
- B. Corporation, partnership, or other organization has financial interest in provider.
- C. Provider has financial interest in corporation, partnership, or other organization.
- D. Director, officer, administrator, or key person of provider or relative of such person has financial interest in related organization.
- E. Individual is director, officer, administrator, or key person of provider and related organization.
- F. Director, officer, administrator, or key person of related organization or relative of such person has financial interest in provider.

## STATEMENT OF COSTS OF SERVICES FROM RELATED ORGANIZATIONS AND HOME OFFICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8-1

Date/Time Prepared:  
11/24/2019 4:22 pm

|                                                                                                                                 | Net<br>Adjustments<br>(col. 4 minus<br>col. 5)* | Wkst. A-7 Ref. |  |      |
|---------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|----------------|--|------|
|                                                                                                                                 | 6.00                                            | 7.00           |  |      |
| A. COSTS INCURRED AND ADJUSTMENTS REQUIRED AS A RESULT OF TRANSACTIONS WITH RELATED ORGANIZATIONS OR CLAIMED HOME OFFICE COSTS: |                                                 |                |  |      |
| 1.00                                                                                                                            | 242,516                                         | 9              |  | 1.00 |
| 2.00                                                                                                                            | 0                                               | 0              |  | 2.00 |
| 3.00                                                                                                                            | 0                                               | 0              |  | 3.00 |
| 4.00                                                                                                                            | 0                                               | 0              |  | 4.00 |
| 5.00                                                                                                                            | 242,516                                         |                |  | 5.00 |

\* The amounts on lines 1-4 (and subscripts as appropriate) are transferred in detail to Worksheet A, column 6, lines as appropriate. Positive amounts increase cost and negative amounts decrease cost. For related organization or home office cost which has not been posted to Worksheet A, columns 1 and/or 2, the amount allowable should be indicated in column 4 of this part.

| Related Organization(s)<br>and/or Home Office                       |  |
|---------------------------------------------------------------------|--|
| Type of Business                                                    |  |
| 6.00                                                                |  |
| B. INTERRELATIONSHIP TO RELATED ORGANIZATION(S) AND/OR HOME OFFICE: |  |

The Secretary, by virtue of the authority granted under section 1814(b)(1) of the Social Security Act, requires that you furnish the information requested under Part B of this worksheet.

This information is used by the Centers for Medicare and Medicaid Services and its intermediaries/contractors in determining that the costs applicable to services, facilities, and supplies furnished by organizations related to you by common ownership or control represent reasonable costs as determined under section 1861 of the Social Security Act. If you do not provide all or any part of the request information, the cost report is considered incomplete and not acceptable for purposes of claiming reimbursement under title XVIII.

|        |                 |  |        |
|--------|-----------------|--|--------|
| 6.00   | MANAGING ENTITY |  | 6.00   |
| 7.00   | CONFERENCE CTR  |  | 7.00   |
| 8.00   |                 |  | 8.00   |
| 9.00   |                 |  | 9.00   |
| 10.00  |                 |  | 10.00  |
| 100.00 |                 |  | 100.00 |

(1) Use the following symbols to indicate interrelationship to related organizations:

- A. Individual has financial interest (stockholder, partner, etc.) in both related organization and in provider.
- B. Corporation, partnership, or other organization has financial interest in provider.
- C. Provider has financial interest in corporation, partnership, or other organization.
- D. Director, officer, administrator, or key person of provider or relative of such person has financial interest in related organization.
- E. Individual is director, officer, administrator, or key person of provider and related organization.
- F. Director, officer, administrator, or key person of related organization or relative of such person has financial interest in provider.

## PROVIDER BASED PHYSICIAN ADJUSTMENT

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8-2

Date/Time Prepared:

11/24/2019 4:22 pm

|       | Wkst. A Line # | Cost Center/Physician Identifier     | Total Remuneration | Professional Component | Provider Component | RCE Amount | Physician/Provider Component Hours |       |
|-------|----------------|--------------------------------------|--------------------|------------------------|--------------------|------------|------------------------------------|-------|
|       | 1.00           | 2.00                                 | 3.00               | 4.00                   | 5.00               | 6.00       | 7.00                               |       |
| 1.00  | 5.03           | RESEARCH ADMINISTRATION              | 201,910            | 0                      | 201,910            | 169,700    | 1,905                              | 1.00  |
| 2.00  | 5.03           | RESEARCH ADMINISTRATION              | 2,877              | 0                      | 2,877              | 181,300    | 29                                 | 2.00  |
| 3.00  | 5.03           | RESEARCH ADMINISTRATION              | 154,671            | 0                      | 154,671            | 197,500    | 1,344                              | 3.00  |
| 4.00  | 5.03           | RESEARCH ADMINISTRATION              | 191,323            | 0                      | 191,323            | 211,500    | 1,552                              | 4.00  |
| 5.00  | 5.03           | RESEARCH ADMINISTRATION              | 66,751             | 0                      | 66,751             | 211,500    | 557                                | 5.00  |
| 6.00  | 5.07           | ADMIN & GEN PT SERVICE               | 90,981             | 0                      | 90,981             | 169,700    | 106                                | 6.00  |
| 7.00  | 5.07           | ADMIN & GEN PT SERVICE               | 3,747              | 0                      | 3,747              | 183,100    | 29                                 | 7.00  |
| 8.00  | 5.07           | ADMIN & GEN PT SERVICE               | 10,491             | 0                      | 10,491             | 197,500    | 106                                | 8.00  |
| 9.00  | 5.09           | RESEARCH FACULTY                     | 343,129            | 0                      | 343,129            | 169,700    | 3,153                              | 9.00  |
| 10.00 | 5.09           | RESEARCH FACULTY                     | 35,380             | 0                      | 35,380             | 179,000    | 281                                | 10.00 |
| 11.00 | 5.09           | RESEARCH FACULTY                     | 37,220             | 0                      | 37,220             | 181,300    | 216                                | 11.00 |
| 12.00 | 5.09           | RESEARCH FACULTY                     | 1,302,044          | 0                      | 1,302,044          | 197,500    | 10,738                             | 12.00 |
| 13.00 | 5.09           | RESEARCH FACULTY                     | 1,077,545          | 0                      | 1,077,545          | 211,500    | 7,368                              | 13.00 |
| 14.00 | 5.09           | RESEARCH FACULTY                     | 130,617            | 0                      | 130,617            | 237,100    | 664                                | 14.00 |
| 15.00 | 5.09           | RESEARCH FACULTY                     | 336,945            | 0                      | 336,945            | 246,400    | 1,692                              | 15.00 |
| 16.00 | 5.10           | RESEARCH SPA                         | 8,856              | 0                      | 8,856              | 169,700    | 1                                  | 16.00 |
| 17.00 | 5.10           | RESEARCH SPA                         | 22,489             | 0                      | 22,489             | 181,300    | 78                                 | 17.00 |
| 18.00 | 5.10           | RESEARCH SPA                         | 48,036             | 0                      | 48,036             | 197,500    | 70                                 | 18.00 |
| 19.00 | 5.10           | RESEARCH SPA                         | 57,536             | 0                      | 57,536             | 211,500    | 1                                  | 19.00 |
| 20.00 | 5.10           | RESEARCH SPA                         | 12,181             | 0                      | 12,181             | 237,100    | 52                                 | 20.00 |
| 21.00 | 5.10           | RESEARCH SPA                         | 54,400             | 0                      | 54,400             | 246,400    | 106                                | 21.00 |
| 22.00 | 5.11           | CORPORATE ADMINISTRATION             | 330,159            | 0                      | 330,159            | 169,700    | 2,050                              | 22.00 |
| 23.00 | 5.11           | CORPORATE ADMINISTRATION             | 218,826            | 0                      | 218,826            | 179,000    | 1,307                              | 23.00 |
| 24.00 | 5.11           | CORPORATE ADMINISTRATION             | 198,847            | 0                      | 198,847            | 181,300    | 784                                | 24.00 |
| 25.00 | 5.11           | CORPORATE ADMINISTRATION             | 410,734            | 0                      | 410,734            | 197,500    | 4,372                              | 25.00 |
| 26.00 | 5.11           | CORPORATE ADMINISTRATION             | 734,185            | 0                      | 734,185            | 211,500    | 2,735                              | 26.00 |
| 27.00 | 5.11           | CORPORATE ADMINISTRATION             | 63,730             | 0                      | 63,730             | 237,100    | 207                                | 27.00 |
| 28.00 | 5.11           | CORPORATE ADMINISTRATION             | 1,095,086          | 0                      | 1,095,086          | 246,400    | 1,844                              | 28.00 |
| 29.00 | 13.00          | NURSING ADMINISTRATION               | 86,013             | 0                      | 86,013             | 211,500    | 625                                | 29.00 |
| 30.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 35,272             | 0                      | 35,272             | 169,700    | 400                                | 30.00 |
| 31.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 265,120            | 0                      | 265,120            | 197,500    | 2,919                              | 31.00 |
| 32.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 56,445             | 0                      | 56,445             | 211,500    | 417                                | 32.00 |
| 33.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 333,099            | 0                      | 333,099            | 237,100    | 1,940                              | 33.00 |
| 34.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 194                | 0                      | 194                | 246,400    | 1                                  | 34.00 |
| 35.00 | 18.00          | CLINICAL LAB ADMIN MED               | 536,437            | 0                      | 536,437            | 197,500    | 3,785                              | 35.00 |
| 36.00 | 18.00          | CLINICAL LAB ADMIN MED               | 35,284             | 0                      | 35,284             | 211,500    | 208                                | 36.00 |
| 37.00 | 18.01          | CLINICAL LAB ADMIN PED               | 172,610            | 0                      | 172,610            | 169,700    | 1,902                              | 37.00 |
| 38.00 | 18.02          | CLINICAL LAB ADMIN OB                | 92,112             | 0                      | 92,112             | 169,700    | 1,060                              | 38.00 |
| 39.00 | 18.02          | CLINICAL LAB ADMIN OB                | 25,884             | 0                      | 25,884             | 197,500    | 104                                | 39.00 |
| 40.00 | 18.02          | CLINICAL LAB ADMIN OB                | 1,022,634          | 0                      | 1,022,634          | 237,100    | 5,322                              | 40.00 |
| 41.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 72,397             | 0                      | 72,397             | 197,500    | 537                                | 41.00 |
| 42.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 50,138             | 0                      | 50,138             | 211,500    | 208                                | 42.00 |
| 43.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 85,037             | 0                      | 85,037             | 237,100    | 415                                | 43.00 |
| 44.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 192,990            | 0                      | 192,990            | 246,400    | 837                                | 44.00 |
| 45.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 26,433             | 0                      | 26,433             | 271,900    | 125                                | 45.00 |
| 46.00 | 18.04          | CLINICAL LAB ADMIN PSYCH             | 131,354            | 0                      | 131,354            | 181,300    | 901                                | 46.00 |
| 47.00 | 18.04          | CLINICAL LAB ADMIN PSYCH             | 5,440              | 0                      | 5,440              | 197,500    | 8                                  | 47.00 |
| 48.00 | 18.06          | CLINICAL LAB ADMIN CARD              | 47,517             | 0                      | 47,517             | 246,400    | 513                                | 48.00 |
| 49.00 | 18.08          | CLINICAL LAB ADMIN NEUR              | 19,872             | 0                      | 19,872             | 197,500    | 207                                | 49.00 |
| 50.00 | 18.08          | CLINICAL LAB ADMIN NEUR              | 452,277            | 0                      | 452,277            | 211,500    | 3,276                              | 50.00 |
| 51.00 | 18.09          | CLINICAL LAB ADMIN OCLS              | 20,066             | 0                      | 20,066             | 260,300    | 1,043                              | 51.00 |
| 52.00 | 18.12          | DISCRETIONARY OPERATIONS             | 59,561             | 0                      | 59,561             | 169,700    | 725                                | 52.00 |
| 53.00 | 18.12          | DISCRETIONARY OPERATIONS             | 106,705            | 0                      | 106,705            | 181,300    | 1,050                              | 53.00 |
| 54.00 | 18.12          | DISCRETIONARY OPERATIONS             | 319,762            | 0                      | 319,762            | 197,500    | 1,985                              | 54.00 |
| 55.00 | 18.12          | DISCRETIONARY OPERATIONS             | 482,032            | 0                      | 482,032            | 211,500    | 3,322                              | 55.00 |
| 56.00 | 18.12          | DISCRETIONARY OPERATIONS             | 55,273             | 0                      | 55,273             | 237,100    | 477                                | 56.00 |
| 57.00 | 18.14          | RUSH UNIVERSITY ADMIN SPLIT          | 10,276             | 0                      | 10,276             | 181,300    | 103                                | 57.00 |
| 58.00 | 18.14          | RUSH UNIVERSITY ADMIN SPLIT          | 159,026            | 0                      | 159,026            | 197,500    | 1,567                              | 58.00 |
| 59.00 | 18.16          | NURSING SCHOOL SPLIT                 | 2,524              | 0                      | 2,524              | 179,000    | 29                                 | 59.00 |
| 60.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 10,475             | 0                      | 10,475             | 169,700    | 86                                 | 60.00 |
| 61.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 106                | 0                      | 106                | 179,000    | 1                                  | 61.00 |
| 62.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 97,875             | 0                      | 97,875             | 197,500    | 898                                | 62.00 |
| 63.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 59,616             | 0                      | 59,616             | 211,500    | 315                                | 63.00 |
| 64.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 24,366             | 0                      | 24,366             | 237,100    | 103                                | 64.00 |
| 65.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 184,930            | 0                      | 184,930            | 246,400    | 523                                | 65.00 |
| 66.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 365,166            | 0                      | 365,166            | 169,700    | 4,180                              | 66.00 |

## PROVIDER BASED PHYSICIAN ADJUSTMENT

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8-2

Date/Time Prepared:  
11/24/2019 4:22 pm

|        | Wkst. A Line # | Cost Center/Physician Identifier     | Total Remuneration   | Professional Component            | Provider Component                         | RCE Amount                          | Physician/Provider Component Hours      |        |
|--------|----------------|--------------------------------------|----------------------|-----------------------------------|--------------------------------------------|-------------------------------------|-----------------------------------------|--------|
|        | 1.00           | 2.00                                 | 3.00                 | 4.00                              | 5.00                                       | 6.00                                | 7.00                                    |        |
| 67.00  | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 316,763              | 0                                 | 316,763                                    | 181,300                             | 2,842                                   | 67.00  |
| 68.00  | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 2,294,760            | 0                                 | 2,294,760                                  | 197,500                             | 20,650                                  | 68.00  |
| 69.00  | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 1,219,982            | 0                                 | 1,219,982                                  | 211,500                             | 10,685                                  | 69.00  |
| 70.00  | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 214,314              | 0                                 | 214,314                                    | 237,100                             | 2,051                                   | 70.00  |
| 71.00  | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 589,732              | 0                                 | 589,732                                    | 246,400                             | 2,271                                   | 71.00  |
| 72.00  | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 50,389               | 0                                 | 50,389                                     | 271,900                             | 314                                     | 72.00  |
| 73.00  | 23.11          | PARAMED PHYSICIANS ASSISTANT         | 21,410               | 0                                 | 21,410                                     | 211,500                             | 102                                     | 73.00  |
| 74.00  | 30.00          | ADULTS & PEDIATRICS                  | 60,675               | 0                                 | 60,675                                     | 169,700                             | 733                                     | 74.00  |
| 75.00  | 30.00          | ADULTS & PEDIATRICS                  | 16,849               | 0                                 | 16,849                                     | 179,000                             | 178                                     | 75.00  |
| 76.00  | 30.00          | ADULTS & PEDIATRICS                  | 13,899               | 0                                 | 13,899                                     | 181,300                             | 135                                     | 76.00  |
| 77.00  | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 38,106               | 0                                 | 38,106                                     | 181,300                             | 417                                     | 77.00  |
| 78.00  | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 543,050              | 0                                 | 543,050                                    | 197,500                             | 3,230                                   | 78.00  |
| 79.00  | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 10,140               | 0                                 | 10,140                                     | 211,500                             | 1                                       | 79.00  |
| 80.00  | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 280,772              | 0                                 | 280,772                                    | 246,400                             | 731                                     | 80.00  |
| 81.00  | 35.01          | PEDIATRIC INTENSIVE CARE UNIT        | 36,431               | 0                                 | 36,431                                     | 169,700                             | 314                                     | 81.00  |
| 82.00  | 35.02          | PREMATURE INTENSIVE CARE UNIT        | 22,553               | 0                                 | 22,553                                     | 169,700                             | 185                                     | 82.00  |
| 83.00  | 41.00          | SUBPROVIDER - IRF                    | 32,314               | 0                                 | 32,314                                     | 211,500                             | 314                                     | 83.00  |
| 84.00  | 54.00          | RADIOLOGY-DIAGNOSTIC                 | 139,683              | 0                                 | 139,683                                    | 271,900                             | 606                                     | 84.00  |
| 85.00  | 60.00          | LABORATORY                           | 165,410              | 0                                 | 165,410                                    | 169,700                             | 1,479                                   | 85.00  |
| 86.00  | 60.00          | LABORATORY                           | 347,398              | 0                                 | 347,398                                    | 197,500                             | 1,951                                   | 86.00  |
| 87.00  | 60.00          | LABORATORY                           | 501,407              | 0                                 | 501,407                                    | 211,500                             | 751                                     | 87.00  |
| 88.00  | 62.00          | WHOLE BLOOD & PACKED RED BLOOD CELLS | 20,421               | 0                                 | 20,421                                     | 271,900                             | 106                                     | 88.00  |
| 89.00  | 62.00          | WHOLE BLOOD & PACKED RED BLOOD CELLS | 18,336               | 0                                 | 18,336                                     | 271,900                             | 85                                      | 89.00  |
| 90.00  | 69.00          | ELECTROCARDIOLOGY                    | 44,555               | 0                                 | 44,555                                     | 169,700                             | 314                                     | 90.00  |
| 91.00  | 69.00          | ELECTROCARDIOLOGY                    | 36,668               | 0                                 | 36,668                                     | 197,500                             | 219                                     | 91.00  |
| 92.00  | 69.00          | ELECTROCARDIOLOGY                    | 40,144               | 0                                 | 40,144                                     | 211,500                             | 404                                     | 92.00  |
| 93.00  | 76.01          | PSYCH DAY HOSPITAL                   | 8,751                | 0                                 | 8,751                                      | 181,300                             | 17                                      | 93.00  |
| 94.00  | 90.00          | CLINIC                               | 50,981               | 0                                 | 50,981                                     | 181,300                             | 314                                     | 94.00  |
| 95.00  | 90.00          | CLINIC                               | 137,362              | 0                                 | 137,362                                    | 211,500                             | 1,224                                   | 95.00  |
| 96.00  | 91.00          | EMERGENCY                            | 228,598              | 0                                 | 228,598                                    | 211,500                             | 1,877                                   | 96.00  |
| 97.00  | 105.00         | KIDNEY ACQUISITION                   | 51                   | 0                                 | 51                                         | 181,300                             | 1                                       | 97.00  |
| 98.00  | 105.00         | KIDNEY ACQUISITION                   | 116,747              | 0                                 | 116,747                                    | 197,500                             | 980                                     | 98.00  |
| 99.00  | 105.00         | KIDNEY ACQUISITION                   | 4,823                | 0                                 | 4,823                                      | 211,500                             | 39                                      | 99.00  |
| 100.00 | 105.00         | KIDNEY ACQUISITION                   | 229,267              | 0                                 | 229,267                                    | 246,400                             | 1,428                                   | 100.00 |
| 101.00 | 107.00         | LIVER ACQUISITION                    | 13,530               | 0                                 | 13,530                                     | 181,300                             | 162                                     | 101.00 |
| 102.00 | 107.00         | LIVER ACQUISITION                    | 167,739              | 0                                 | 167,739                                    | 197,500                             | 1,205                                   | 102.00 |
| 103.00 | 107.00         | LIVER ACQUISITION                    | 9,925                | 0                                 | 9,925                                      | 211,500                             | 83                                      | 103.00 |
| 104.00 | 107.00         | LIVER ACQUISITION                    | 125,985              | 0                                 | 125,985                                    | 246,400                             | 502                                     | 104.00 |
| 105.00 | 109.00         | PANCREAS ACQUISITION                 | 1,694                | 0                                 | 1,694                                      | 181,300                             | 18                                      | 105.00 |
| 106.00 | 109.00         | PANCREAS ACQUISITION                 | 12,872               | 0                                 | 12,872                                     | 197,500                             | 86                                      | 106.00 |
| 107.00 | 109.00         | PANCREAS ACQUISITION                 | 40,106               | 0                                 | 40,106                                     | 246,400                             | 271                                     | 107.00 |
| 200.00 |                |                                      | 21,167,606           | 0                                 | 21,167,606                                 |                                     | 144,739                                 | 200.00 |
|        | Wkst. A Line # | Cost Center/Physician Identifier     | Unadjusted RCE Limit | 5 Percent of Unadjusted RCE Limit | Cost of Memberships & Continuing Education | Provider Component Share of col. 12 | Physician Cost of Malpractice Insurance |        |
|        | 1.00           | 2.00                                 | 8.00                 | 9.00                              | 12.00                                      | 13.00                               | 14.00                                   |        |
| 1.00   | 5.03           | RESEARCH ADMINISTRATION              | 155,422              | 7,771                             | 0                                          | 0                                   | 0                                       | 1.00   |
| 2.00   | 5.03           | RESEARCH ADMINISTRATION              | 2,528                | 126                               | 0                                          | 0                                   | 0                                       | 2.00   |
| 3.00   | 5.03           | RESEARCH ADMINISTRATION              | 127,615              | 6,381                             | 0                                          | 0                                   | 0                                       | 3.00   |
| 4.00   | 5.03           | RESEARCH ADMINISTRATION              | 157,812              | 7,891                             | 0                                          | 0                                   | 0                                       | 4.00   |
| 5.00   | 5.03           | RESEARCH ADMINISTRATION              | 56,637               | 2,832                             | 0                                          | 0                                   | 0                                       | 5.00   |
| 6.00   | 5.07           | ADMIN & GEN PT SERVICE               | 8,648                | 432                               | 0                                          | 0                                   | 0                                       | 6.00   |
| 7.00   | 5.07           | ADMIN & GEN PT SERVICE               | 2,553                | 128                               | 0                                          | 0                                   | 0                                       | 7.00   |
| 8.00   | 5.07           | ADMIN & GEN PT SERVICE               | 10,065               | 503                               | 0                                          | 0                                   | 0                                       | 8.00   |
| 9.00   | 5.09           | RESEARCH FACULTY                     | 257,242              | 12,862                            | 0                                          | 0                                   | 0                                       | 9.00   |
| 10.00  | 5.09           | RESEARCH FACULTY                     | 24,182               | 1,209                             | 0                                          | 0                                   | 0                                       | 10.00  |
| 11.00  | 5.09           | RESEARCH FACULTY                     | 18,827               | 941                               | 0                                          | 0                                   | 0                                       | 11.00  |
| 12.00  | 5.09           | RESEARCH FACULTY                     | 1,019,594            | 50,980                            | 0                                          | 0                                   | 0                                       | 12.00  |
| 13.00  | 5.09           | RESEARCH FACULTY                     | 749,198              | 37,460                            | 0                                          | 0                                   | 0                                       | 13.00  |
| 14.00  | 5.09           | RESEARCH FACULTY                     | 75,690               | 3,785                             | 0                                          | 0                                   | 0                                       | 14.00  |
| 15.00  | 5.09           | RESEARCH FACULTY                     | 200,437              | 10,022                            | 0                                          | 0                                   | 0                                       | 15.00  |
| 16.00  | 5.10           | RESEARCH SPA                         | 82                   | 4                                 | 0                                          | 0                                   | 0                                       | 16.00  |

## PROVIDER BASED PHYSICIAN ADJUSTMENT

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8-2

Date/Time Prepared:  
11/24/2019 4:22 pm

|       | Wkst. A Line # | Cost Center/Physician Identifier     | Unadjusted RCE Limit | 5 Percent of Unadjusted RCE Limit | Cost of Memberships & Continuing Education | Provider Component Share of col. 12 | Physician Cost of Malpractice Insurance |       |
|-------|----------------|--------------------------------------|----------------------|-----------------------------------|--------------------------------------------|-------------------------------------|-----------------------------------------|-------|
|       | 1.00           | 2.00                                 | 8.00                 | 9.00                              | 12.00                                      | 13.00                               | 14.00                                   |       |
| 17.00 | 5.10           | RESEARCH SPA                         | 6,799                | 340                               | 0                                          | 0                                   | 0                                       | 17.00 |
| 18.00 | 5.10           | RESEARCH SPA                         | 6,647                | 332                               | 0                                          | 0                                   | 0                                       | 18.00 |
| 19.00 | 5.10           | RESEARCH SPA                         | 102                  | 5                                 | 0                                          | 0                                   | 0                                       | 19.00 |
| 20.00 | 5.10           | RESEARCH SPA                         | 5,928                | 296                               | 0                                          | 0                                   | 0                                       | 20.00 |
| 21.00 | 5.10           | RESEARCH SPA                         | 12,557               | 628                               | 0                                          | 0                                   | 0                                       | 21.00 |
| 22.00 | 5.11           | CORPORATE ADMINISTRATION             | 167,252              | 8,363                             | 0                                          | 0                                   | 0                                       | 22.00 |
| 23.00 | 5.11           | CORPORATE ADMINISTRATION             | 112,477              | 5,624                             | 0                                          | 0                                   | 0                                       | 23.00 |
| 24.00 | 5.11           | CORPORATE ADMINISTRATION             | 68,336               | 3,417                             | 0                                          | 0                                   | 0                                       | 24.00 |
| 25.00 | 5.11           | CORPORATE ADMINISTRATION             | 415,130              | 20,757                            | 0                                          | 0                                   | 0                                       | 25.00 |
| 26.00 | 5.11           | CORPORATE ADMINISTRATION             | 278,102              | 13,905                            | 0                                          | 0                                   | 0                                       | 26.00 |
| 27.00 | 5.11           | CORPORATE ADMINISTRATION             | 23,596               | 1,180                             | 0                                          | 0                                   | 0                                       | 27.00 |
| 28.00 | 5.11           | CORPORATE ADMINISTRATION             | 218,443              | 10,922                            | 0                                          | 0                                   | 0                                       | 28.00 |
| 29.00 | 13.00          | NURSING ADMINISTRATION               | 63,552               | 3,178                             | 0                                          | 0                                   | 0                                       | 29.00 |
| 30.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 32,635               | 1,632                             | 0                                          | 0                                   | 0                                       | 30.00 |
| 31.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 277,165              | 13,858                            | 0                                          | 0                                   | 0                                       | 31.00 |
| 32.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 42,402               | 2,120                             | 0                                          | 0                                   | 0                                       | 32.00 |
| 33.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 221,141              | 11,057                            | 0                                          | 0                                   | 0                                       | 33.00 |
| 34.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 119                  | 6                                 | 0                                          | 0                                   | 0                                       | 34.00 |
| 35.00 | 18.00          | CLINICAL LAB ADMIN MED               | 359,393              | 17,970                            | 0                                          | 0                                   | 0                                       | 35.00 |
| 36.00 | 18.00          | CLINICAL LAB ADMIN MED               | 21,150               | 1,058                             | 0                                          | 0                                   | 0                                       | 36.00 |
| 37.00 | 18.01          | CLINICAL LAB ADMIN PED               | 155,178              | 7,759                             | 0                                          | 0                                   | 0                                       | 37.00 |
| 38.00 | 18.02          | CLINICAL LAB ADMIN OB                | 86,482               | 4,324                             | 0                                          | 0                                   | 0                                       | 38.00 |
| 39.00 | 18.02          | CLINICAL LAB ADMIN OB                | 9,875                | 494                               | 0                                          | 0                                   | 0                                       | 39.00 |
| 40.00 | 18.02          | CLINICAL LAB ADMIN OB                | 606,657              | 30,333                            | 0                                          | 0                                   | 0                                       | 40.00 |
| 41.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 50,989               | 2,549                             | 0                                          | 0                                   | 0                                       | 41.00 |
| 42.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 21,150               | 1,058                             | 0                                          | 0                                   | 0                                       | 42.00 |
| 43.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 47,306               | 2,365                             | 0                                          | 0                                   | 0                                       | 43.00 |
| 44.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 99,152               | 4,958                             | 0                                          | 0                                   | 0                                       | 44.00 |
| 45.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 16,340               | 817                               | 0                                          | 0                                   | 0                                       | 45.00 |
| 46.00 | 18.04          | CLINICAL LAB ADMIN PSYCH             | 78,534               | 3,927                             | 0                                          | 0                                   | 0                                       | 46.00 |
| 47.00 | 18.04          | CLINICAL LAB ADMIN PSYCH             | 760                  | 38                                | 0                                          | 0                                   | 0                                       | 47.00 |
| 48.00 | 18.06          | CLINICAL LAB ADMIN CARD              | 60,771               | 3,039                             | 0                                          | 0                                   | 0                                       | 48.00 |
| 49.00 | 18.08          | CLINICAL LAB ADMIN NEUR              | 19,655               | 983                               | 0                                          | 0                                   | 0                                       | 49.00 |
| 50.00 | 18.08          | CLINICAL LAB ADMIN NEUR              | 333,113              | 16,656                            | 0                                          | 0                                   | 0                                       | 50.00 |
| 51.00 | 18.09          | CLINICAL LAB ADMIN OCLS              | 130,525              | 6,526                             | 0                                          | 0                                   | 0                                       | 51.00 |
| 52.00 | 18.12          | DISCRETIONARY OPERATIONS             | 59,150               | 2,958                             | 0                                          | 0                                   | 0                                       | 52.00 |
| 53.00 | 18.12          | DISCRETIONARY OPERATIONS             | 91,522               | 4,576                             | 0                                          | 0                                   | 0                                       | 53.00 |
| 54.00 | 18.12          | DISCRETIONARY OPERATIONS             | 188,480              | 9,424                             | 0                                          | 0                                   | 0                                       | 54.00 |
| 55.00 | 18.12          | DISCRETIONARY OPERATIONS             | 337,790              | 16,890                            | 0                                          | 0                                   | 0                                       | 55.00 |
| 56.00 | 18.12          | DISCRETIONARY OPERATIONS             | 54,373               | 2,719                             | 0                                          | 0                                   | 0                                       | 56.00 |
| 57.00 | 18.14          | RUSH UNIVERSITY ADMIN SPLIT          | 8,978                | 449                               | 0                                          | 0                                   | 0                                       | 57.00 |
| 58.00 | 18.14          | RUSH UNIVERSITY ADMIN SPLIT          | 148,790              | 7,440                             | 0                                          | 0                                   | 0                                       | 58.00 |
| 59.00 | 18.16          | NURSING SCHOOL SPLIT                 | 2,496                | 125                               | 0                                          | 0                                   | 0                                       | 59.00 |
| 60.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 7,016                | 351                               | 0                                          | 0                                   | 0                                       | 60.00 |
| 61.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 86                   | 4                                 | 0                                          | 0                                   | 0                                       | 61.00 |
| 62.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 85,267               | 4,263                             | 0                                          | 0                                   | 0                                       | 62.00 |
| 63.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 32,030               | 1,602                             | 0                                          | 0                                   | 0                                       | 63.00 |
| 64.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 11,741               | 587                               | 0                                          | 0                                   | 0                                       | 64.00 |
| 65.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 61,955               | 3,098                             | 0                                          | 0                                   | 0                                       | 65.00 |
| 66.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 341,032              | 17,052                            | 0                                          | 0                                   | 0                                       | 66.00 |
| 67.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 247,719              | 12,386                            | 0                                          | 0                                   | 0                                       | 67.00 |
| 68.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 1,960,757            | 98,038                            | 0                                          | 0                                   | 0                                       | 68.00 |
| 69.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 1,086,480            | 54,324                            | 0                                          | 0                                   | 0                                       | 69.00 |
| 70.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 233,794              | 11,690                            | 0                                          | 0                                   | 0                                       | 70.00 |
| 71.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 269,026              | 13,451                            | 0                                          | 0                                   | 0                                       | 71.00 |
| 72.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 41,047               | 2,052                             | 0                                          | 0                                   | 0                                       | 72.00 |
| 73.00 | 23.11          | PARAMED PHYSICIANS ASSISTANT         | 10,372               | 519                               | 0                                          | 0                                   | 0                                       | 73.00 |
| 74.00 | 30.00          | ADULTS & PEDIATRICS                  | 59,803               | 2,990                             | 0                                          | 0                                   | 0                                       | 74.00 |
| 75.00 | 30.00          | ADULTS & PEDIATRICS                  | 15,318               | 766                               | 0                                          | 0                                   | 0                                       | 75.00 |
| 76.00 | 30.00          | ADULTS & PEDIATRICS                  | 11,767               | 588                               | 0                                          | 0                                   | 0                                       | 76.00 |

## PROVIDER BASED PHYSICIAN ADJUSTMENT

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8-2

Date/Time Prepared:  
11/24/2019 4:22 pm

|        | Wkst. A Line # | Cost Center/Physician Identifier     | Unadjusted RCE Limit                | 5 Percent of Unadjusted RCE Limit | Cost of Memberships & Continuing Education | Provider Component Share of col. 12 | Physician Cost of Malpractice Insurance |        |
|--------|----------------|--------------------------------------|-------------------------------------|-----------------------------------|--------------------------------------------|-------------------------------------|-----------------------------------------|--------|
|        | 1.00           | 2.00                                 | 8.00                                | 9.00                              | 12.00                                      | 13.00                               | 14.00                                   |        |
| 77.00  | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 36,347                              | 1,817                             | 0                                          | 0                                   | 0                                       | 77.00  |
| 78.00  | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 306,695                             | 15,335                            | 0                                          | 0                                   | 0                                       | 78.00  |
| 79.00  | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 102                                 | 5                                 | 0                                          | 0                                   | 0                                       | 79.00  |
| 80.00  | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 86,595                              | 4,330                             | 0                                          | 0                                   | 0                                       | 80.00  |
| 81.00  | 35.01          | PEDIATRIC INTENSIVE CARE UNIT        | 25,618                              | 1,281                             | 0                                          | 0                                   | 0                                       | 81.00  |
| 82.00  | 35.02          | PREMATURE INTENSIVE CARE UNIT        | 15,093                              | 755                               | 0                                          | 0                                   | 0                                       | 82.00  |
| 83.00  | 41.00          | SUBPROVIDER - IRF                    | 31,928                              | 1,596                             | 0                                          | 0                                   | 0                                       | 83.00  |
| 84.00  | 54.00          | RADIOLOGY-DIAGNOSTIC                 | 79,217                              | 3,961                             | 0                                          | 0                                   | 0                                       | 84.00  |
| 85.00  | 60.00          | LABORATORY                           | 120,667                             | 6,033                             | 0                                          | 0                                   | 0                                       | 85.00  |
| 86.00  | 60.00          | LABORATORY                           | 185,251                             | 9,263                             | 0                                          | 0                                   | 0                                       | 86.00  |
| 87.00  | 60.00          | LABORATORY                           | 76,364                              | 3,818                             | 0                                          | 0                                   | 0                                       | 87.00  |
| 88.00  | 62.00          | WHOLE BLOOD & PACKED RED BLOOD CELLS | 13,857                              | 693                               | 0                                          | 0                                   | 0                                       | 88.00  |
| 89.00  | 62.00          | WHOLE BLOOD & PACKED RED BLOOD CELLS | 11,111                              | 556                               | 0                                          | 0                                   | 0                                       | 89.00  |
| 90.00  | 69.00          | ELECTROCARDIOLOGY                    | 25,618                              | 1,281                             | 0                                          | 0                                   | 0                                       | 90.00  |
| 91.00  | 69.00          | ELECTROCARDIOLOGY                    | 20,794                              | 1,040                             | 0                                          | 0                                   | 0                                       | 91.00  |
| 92.00  | 69.00          | ELECTROCARDIOLOGY                    | 41,080                              | 2,054                             | 0                                          | 0                                   | 0                                       | 92.00  |
| 93.00  | 76.01          | PSYCH DAY HOSPITAL                   | 1,482                               | 74                                | 0                                          | 0                                   | 0                                       | 93.00  |
| 94.00  | 90.00          | CLINIC                               | 27,369                              | 1,368                             | 0                                          | 0                                   | 0                                       | 94.00  |
| 95.00  | 90.00          | CLINIC                               | 124,460                             | 6,223                             | 0                                          | 0                                   | 0                                       | 95.00  |
| 96.00  | 91.00          | EMERGENCY                            | 190,858                             | 9,543                             | 0                                          | 0                                   | 0                                       | 96.00  |
| 97.00  | 105.00         | KIDNEY ACQUISITION                   | 87                                  | 4                                 | 0                                          | 0                                   | 0                                       | 97.00  |
| 98.00  | 105.00         | KIDNEY ACQUISITION                   | 93,053                              | 4,653                             | 0                                          | 0                                   | 0                                       | 98.00  |
| 99.00  | 105.00         | KIDNEY ACQUISITION                   | 3,966                               | 198                               | 0                                          | 0                                   | 0                                       | 99.00  |
| 100.00 | 105.00         | KIDNEY ACQUISITION                   | 169,163                             | 8,458                             | 0                                          | 0                                   | 0                                       | 100.00 |
| 101.00 | 107.00         | LIVER ACQUISITION                    | 14,121                              | 706                               | 0                                          | 0                                   | 0                                       | 101.00 |
| 102.00 | 107.00         | LIVER ACQUISITION                    | 114,417                             | 5,721                             | 0                                          | 0                                   | 0                                       | 102.00 |
| 103.00 | 107.00         | LIVER ACQUISITION                    | 8,440                               | 422                               | 0                                          | 0                                   | 0                                       | 103.00 |
| 104.00 | 107.00         | LIVER ACQUISITION                    | 59,468                              | 2,973                             | 0                                          | 0                                   | 0                                       | 104.00 |
| 105.00 | 109.00         | PANCREAS ACQUISITION                 | 1,569                               | 78                                | 0                                          | 0                                   | 0                                       | 105.00 |
| 106.00 | 109.00         | PANCREAS ACQUISITION                 | 8,166                               | 408                               | 0                                          | 0                                   | 0                                       | 106.00 |
| 107.00 | 109.00         | PANCREAS ACQUISITION                 | 32,103                              | 1,605                             | 0                                          | 0                                   | 0                                       | 107.00 |
| 200.00 |                |                                      | 14,207,793                          | 710,395                           | 0                                          | 0                                   | 0                                       | 200.00 |
|        | Wkst. A Line # | Cost Center/Physician Identifier     | Provider Component Share of col. 14 | Adjusted RCE Limit                | RCE Disallowance                           | Adjustment                          |                                         |        |
|        | 1.00           | 2.00                                 | 15.00                               | 16.00                             | 17.00                                      | 18.00                               |                                         |        |
| 1.00   | 5.03           | RESEARCH ADMINISTRATION              | 0                                   | 155,422                           | 46,488                                     | 46,488                              |                                         | 1.00   |
| 2.00   | 5.03           | RESEARCH ADMINISTRATION              | 0                                   | 2,528                             | 349                                        | 349                                 |                                         | 2.00   |
| 3.00   | 5.03           | RESEARCH ADMINISTRATION              | 0                                   | 127,615                           | 27,056                                     | 27,056                              |                                         | 3.00   |
| 4.00   | 5.03           | RESEARCH ADMINISTRATION              | 0                                   | 157,812                           | 33,511                                     | 33,511                              |                                         | 4.00   |
| 5.00   | 5.03           | RESEARCH ADMINISTRATION              | 0                                   | 56,637                            | 10,114                                     | 10,114                              |                                         | 5.00   |
| 6.00   | 5.07           | ADMIN & GEN PT SERVICE               | 0                                   | 8,648                             | 82,333                                     | 82,333                              |                                         | 6.00   |
| 7.00   | 5.07           | ADMIN & GEN PT SERVICE               | 0                                   | 2,553                             | 1,194                                      | 1,194                               |                                         | 7.00   |
| 8.00   | 5.07           | ADMIN & GEN PT SERVICE               | 0                                   | 10,065                            | 426                                        | 426                                 |                                         | 8.00   |
| 9.00   | 5.09           | RESEARCH FACULTY                     | 0                                   | 257,242                           | 85,887                                     | 85,887                              |                                         | 9.00   |
| 10.00  | 5.09           | RESEARCH FACULTY                     | 0                                   | 24,182                            | 11,198                                     | 11,198                              |                                         | 10.00  |
| 11.00  | 5.09           | RESEARCH FACULTY                     | 0                                   | 18,827                            | 18,393                                     | 18,393                              |                                         | 11.00  |
| 12.00  | 5.09           | RESEARCH FACULTY                     | 0                                   | 1,019,594                         | 282,450                                    | 282,450                             |                                         | 12.00  |
| 13.00  | 5.09           | RESEARCH FACULTY                     | 0                                   | 749,198                           | 328,347                                    | 328,347                             |                                         | 13.00  |
| 14.00  | 5.09           | RESEARCH FACULTY                     | 0                                   | 75,690                            | 54,927                                     | 54,927                              |                                         | 14.00  |
| 15.00  | 5.09           | RESEARCH FACULTY                     | 0                                   | 200,437                           | 136,508                                    | 136,508                             |                                         | 15.00  |
| 16.00  | 5.10           | RESEARCH SPA                         | 0                                   | 82                                | 8,774                                      | 8,774                               |                                         | 16.00  |
| 17.00  | 5.10           | RESEARCH SPA                         | 0                                   | 6,799                             | 15,690                                     | 15,690                              |                                         | 17.00  |
| 18.00  | 5.10           | RESEARCH SPA                         | 0                                   | 6,647                             | 41,389                                     | 41,389                              |                                         | 18.00  |
| 19.00  | 5.10           | RESEARCH SPA                         | 0                                   | 102                               | 57,434                                     | 57,434                              |                                         | 19.00  |
| 20.00  | 5.10           | RESEARCH SPA                         | 0                                   | 5,928                             | 6,253                                      | 6,253                               |                                         | 20.00  |
| 21.00  | 5.10           | RESEARCH SPA                         | 0                                   | 12,557                            | 41,843                                     | 41,843                              |                                         | 21.00  |
| 22.00  | 5.11           | CORPORATE ADMINISTRATION             | 0                                   | 167,252                           | 162,907                                    | 162,907                             |                                         | 22.00  |
| 23.00  | 5.11           | CORPORATE ADMINISTRATION             | 0                                   | 112,477                           | 106,349                                    | 106,349                             |                                         | 23.00  |
| 24.00  | 5.11           | CORPORATE ADMINISTRATION             | 0                                   | 68,336                            | 130,511                                    | 130,511                             |                                         | 24.00  |
| 25.00  | 5.11           | CORPORATE ADMINISTRATION             | 0                                   | 415,130                           | 0                                          | 0                                   |                                         | 25.00  |
| 26.00  | 5.11           | CORPORATE ADMINISTRATION             | 0                                   | 278,102                           | 456,083                                    | 456,083                             |                                         | 26.00  |
| 27.00  | 5.11           | CORPORATE ADMINISTRATION             | 0                                   | 23,596                            | 40,134                                     | 40,134                              |                                         | 27.00  |
| 28.00  | 5.11           | CORPORATE ADMINISTRATION             | 0                                   | 218,443                           | 876,643                                    | 876,643                             |                                         | 28.00  |
| 29.00  | 13.00          | NURSING ADMINISTRATION               | 0                                   | 63,552                            | 22,461                                     | 22,461                              |                                         | 29.00  |
| 30.00  | 16.01          | MEDICAL RECORDS & LIBRARY            | 0                                   | 32,635                            | 2,637                                      | 2,637                               |                                         | 30.00  |
| 31.00  | 16.01          | MEDICAL RECORDS & LIBRARY            | 0                                   | 277,165                           | 0                                          | 0                                   |                                         | 31.00  |

## PROVIDER BASED PHYSICIAN ADJUSTMENT

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8-2

Date/Time Prepared:  
11/24/2019 4:22 pm

|       | Wkst. A Line # | Cost Center/Physician Identifier     | Provider Component Share of col. 14 | Adjusted RCE Limit | RCE Disallowance | Adjustment |  |       |
|-------|----------------|--------------------------------------|-------------------------------------|--------------------|------------------|------------|--|-------|
|       | 1.00           | 2.00                                 | 15.00                               | 16.00              | 17.00            | 18.00      |  |       |
| 32.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 0                                   | 42,402             | 14,043           | 14,043     |  | 32.00 |
| 33.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 0                                   | 221,141            | 111,958          | 111,958    |  | 33.00 |
| 34.00 | 16.01          | MEDICAL RECORDS & LIBRARY            | 0                                   | 119                | 75               | 75         |  | 34.00 |
| 35.00 | 18.00          | CLINICAL LAB ADMIN MED               | 0                                   | 359,393            | 177,044          | 177,044    |  | 35.00 |
| 36.00 | 18.00          | CLINICAL LAB ADMIN MED               | 0                                   | 21,150             | 14,134           | 14,134     |  | 36.00 |
| 37.00 | 18.01          | CLINICAL LAB ADMIN PED               | 0                                   | 155,178            | 17,432           | 17,432     |  | 37.00 |
| 38.00 | 18.02          | CLINICAL LAB ADMIN OB                | 0                                   | 86,482             | 5,630            | 5,630      |  | 38.00 |
| 39.00 | 18.02          | CLINICAL LAB ADMIN OB                | 0                                   | 9,875              | 16,009           | 16,009     |  | 39.00 |
| 40.00 | 18.02          | CLINICAL LAB ADMIN OB                | 0                                   | 606,657            | 415,977          | 415,977    |  | 40.00 |
| 41.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 0                                   | 50,989             | 21,408           | 21,408     |  | 41.00 |
| 42.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 0                                   | 21,150             | 28,988           | 28,988     |  | 42.00 |
| 43.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 0                                   | 47,306             | 37,731           | 37,731     |  | 43.00 |
| 44.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 0                                   | 99,152             | 93,838           | 93,838     |  | 44.00 |
| 45.00 | 18.03          | CLINICAL LAB ADMIN SURG              | 0                                   | 16,340             | 10,093           | 10,093     |  | 45.00 |
| 46.00 | 18.04          | CLINICAL LAB ADMIN PSYCH             | 0                                   | 78,534             | 52,820           | 52,820     |  | 46.00 |
| 47.00 | 18.04          | CLINICAL LAB ADMIN PSYCH             | 0                                   | 760                | 4,680            | 4,680      |  | 47.00 |
| 48.00 | 18.06          | CLINICAL LAB ADMIN CARD              | 0                                   | 60,771             | 0                | 0          |  | 48.00 |
| 49.00 | 18.08          | CLINICAL LAB ADMIN NEUR              | 0                                   | 19,655             | 217              | 217        |  | 49.00 |
| 50.00 | 18.08          | CLINICAL LAB ADMIN NEUR              | 0                                   | 333,113            | 119,164          | 119,164    |  | 50.00 |
| 51.00 | 18.09          | CLINICAL LAB ADMIN OCLS              | 0                                   | 130,525            | 0                | 0          |  | 51.00 |
| 52.00 | 18.12          | DISCRETIONARY OPERATIONS             | 0                                   | 59,150             | 411              | 411        |  | 52.00 |
| 53.00 | 18.12          | DISCRETIONARY OPERATIONS             | 0                                   | 91,522             | 15,183           | 15,183     |  | 53.00 |
| 54.00 | 18.12          | DISCRETIONARY OPERATIONS             | 0                                   | 188,480            | 131,282          | 131,282    |  | 54.00 |
| 55.00 | 18.12          | DISCRETIONARY OPERATIONS             | 0                                   | 337,790            | 144,242          | 144,242    |  | 55.00 |
| 56.00 | 18.12          | DISCRETIONARY OPERATIONS             | 0                                   | 54,373             | 900              | 900        |  | 56.00 |
| 57.00 | 18.14          | RUSH UNIVERSITY ADMIN SPLIT          | 0                                   | 8,978              | 1,298            | 1,298      |  | 57.00 |
| 58.00 | 18.14          | RUSH UNIVERSITY ADMIN SPLIT          | 0                                   | 148,790            | 10,236           | 10,236     |  | 58.00 |
| 59.00 | 18.16          | NURSING SCHOOL SPLIT                 | 0                                   | 2,496              | 28               | 28         |  | 59.00 |
| 60.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                   | 7,016              | 3,459            | 3,459      |  | 60.00 |
| 61.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                   | 86                 | 20               | 20         |  | 61.00 |
| 62.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                   | 85,267             | 12,608           | 12,608     |  | 62.00 |
| 63.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                   | 32,030             | 27,586           | 27,586     |  | 63.00 |
| 64.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                   | 11,741             | 12,625           | 12,625     |  | 64.00 |
| 65.00 | 21.00          | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                   | 61,955             | 122,975          | 122,975    |  | 65.00 |
| 66.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                   | 341,032            | 24,134           | 24,134     |  | 66.00 |
| 67.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                   | 247,719            | 69,044           | 69,044     |  | 67.00 |
| 68.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                   | 1,960,757          | 334,003          | 334,003    |  | 68.00 |
| 69.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                   | 1,086,480          | 133,502          | 133,502    |  | 69.00 |
| 70.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                   | 233,794            | 0                | 0          |  | 70.00 |
| 71.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                   | 269,026            | 320,706          | 320,706    |  | 71.00 |
| 72.00 | 22.00          | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                   | 41,047             | 9,342            | 9,342      |  | 72.00 |
| 73.00 | 23.11          | PARAMED PHYSICIANS ASSISTANT         | 0                                   | 10,372             | 11,038           | 11,038     |  | 73.00 |
| 74.00 | 30.00          | ADULTS & PEDIATRICS                  | 0                                   | 59,803             | 872              | 872        |  | 74.00 |
| 75.00 | 30.00          | ADULTS & PEDIATRICS                  | 0                                   | 15,318             | 1,531            | 1,531      |  | 75.00 |
| 76.00 | 30.00          | ADULTS & PEDIATRICS                  | 0                                   | 11,767             | 2,132            | 2,132      |  | 76.00 |
| 77.00 | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 0                                   | 36,347             | 1,759            | 1,759      |  | 77.00 |
| 78.00 | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 0                                   | 306,695            | 236,355          | 236,355    |  | 78.00 |
| 79.00 | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 0                                   | 102                | 10,038           | 10,038     |  | 79.00 |
| 80.00 | 35.00          | MEDICAL INTENSIVE CARE UNIT          | 0                                   | 86,595             | 194,177          | 194,177    |  | 80.00 |
| 81.00 | 35.01          | PEDIATRIC INTENSIVE CARE UNIT        | 0                                   | 25,618             | 10,813           | 10,813     |  | 81.00 |
| 82.00 | 35.02          | PREMATURE INTENSIVE CARE UNIT        | 0                                   | 15,093             | 7,460            | 7,460      |  | 82.00 |
| 83.00 | 41.00          | SUBPROVIDER - IRF                    | 0                                   | 31,928             | 386              | 386        |  | 83.00 |
| 84.00 | 54.00          | RADIOLOGY-DIAGNOSTIC                 | 0                                   | 79,217             | 60,466           | 60,466     |  | 84.00 |
| 85.00 | 60.00          | LABORATORY                           | 0                                   | 120,667            | 44,743           | 44,743     |  | 85.00 |
| 86.00 | 60.00          | LABORATORY                           | 0                                   | 185,251            | 162,147          | 162,147    |  | 86.00 |
| 87.00 | 60.00          | LABORATORY                           | 0                                   | 76,364             | 425,043          | 425,043    |  | 87.00 |
| 88.00 | 62.00          | WHOLE BLOOD & PACKED RED BLOOD CELLS | 0                                   | 13,857             | 6,564            | 6,564      |  | 88.00 |

## PROVIDER BASED PHYSICIAN ADJUSTMENT

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet A-8-2

Date/Time Prepared:  
11/24/2019 4:22 pm

|        | Wkst. A Line # | Cost Center/Physician Identifier     | Provider Component Share of col. 14 | Adjusted RCE Limit | RCE Disallowance | Adjustment |  |        |
|--------|----------------|--------------------------------------|-------------------------------------|--------------------|------------------|------------|--|--------|
|        | 1.00           | 2.00                                 | 15.00                               | 16.00              | 17.00            | 18.00      |  |        |
| 89.00  | 62.00          | WHOLE BLOOD & PACKED RED BLOOD CELLS | 0                                   | 11,111             | 7,225            | 7,225      |  | 89.00  |
| 90.00  | 69.00          | ELECTROCARDIOLOGY                    | 0                                   | 25,618             | 18,937           | 18,937     |  | 90.00  |
| 91.00  | 69.00          | ELECTROCARDIOLOGY                    | 0                                   | 20,794             | 15,874           | 15,874     |  | 91.00  |
| 92.00  | 69.00          | ELECTROCARDIOLOGY                    | 0                                   | 41,080             | 0                | 0          |  | 92.00  |
| 93.00  | 76.01          | PSYCH DAY HOSPITAL                   | 0                                   | 1,482              | 7,269            | 7,269      |  | 93.00  |
| 94.00  | 90.00          | CLINIC                               | 0                                   | 27,369             | 23,612           | 23,612     |  | 94.00  |
| 95.00  | 90.00          | CLINIC                               | 0                                   | 124,460            | 12,902           | 12,902     |  | 95.00  |
| 96.00  | 91.00          | EMERGENCY                            | 0                                   | 190,858            | 37,740           | 37,740     |  | 96.00  |
| 97.00  | 105.00         | KIDNEY ACQUISITION                   | 0                                   | 87                 | 0                | 0          |  | 97.00  |
| 98.00  | 105.00         | KIDNEY ACQUISITION                   | 0                                   | 93,053             | 23,694           | 23,694     |  | 98.00  |
| 99.00  | 105.00         | KIDNEY ACQUISITION                   | 0                                   | 3,966              | 857              | 857        |  | 99.00  |
| 100.00 | 105.00         | KIDNEY ACQUISITION                   | 0                                   | 169,163            | 60,104           | 60,104     |  | 100.00 |
| 101.00 | 107.00         | LIVER ACQUISITION                    | 0                                   | 14,121             | 0                | 0          |  | 101.00 |
| 102.00 | 107.00         | LIVER ACQUISITION                    | 0                                   | 114,417            | 53,322           | 53,322     |  | 102.00 |
| 103.00 | 107.00         | LIVER ACQUISITION                    | 0                                   | 8,440              | 1,485            | 1,485      |  | 103.00 |
| 104.00 | 107.00         | LIVER ACQUISITION                    | 0                                   | 59,468             | 66,517           | 66,517     |  | 104.00 |
| 105.00 | 109.00         | PANCREAS ACQUISITION                 | 0                                   | 1,569              | 125              | 125        |  | 105.00 |
| 106.00 | 109.00         | PANCREAS ACQUISITION                 | 0                                   | 8,166              | 4,706            | 4,706      |  | 106.00 |
| 107.00 | 109.00         | PANCREAS ACQUISITION                 | 0                                   | 32,103             | 8,003            | 8,003      |  | 107.00 |
| 200.00 |                |                                      | 0                                   | 14,207,793         | 7,121,010        | 7,121,010  |  | 200.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS                                             |             |                              |                             |                             |       |
|------------------------------|-------|--------------------------------------|-------------------------------------------------------------------|-------------|------------------------------|-----------------------------|-----------------------------|-------|
|                              |       |                                      | Net Expenses<br>for Cost<br>Allocation<br>(from Wkst A<br>col. 7) | BLDG & FIXT | DEPRECIATION<br>OLD HOSPITAL | DEPRECIATION<br>DIRECT BLDG | DEPRECIATION<br>KELLOGG PAV |       |
|                              |       |                                      |                                                                   |             |                              |                             |                             |       |
|                              |       |                                      | 0                                                                 | 1.00        | 1.01                         | 1.02                        | 1.03                        |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                                                   |             |                              |                             |                             |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            | 0                                                                 | 0           |                              |                             |                             | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            | 1,219,128                                                         | 0           | 1,219,128                    |                             |                             | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             | 6,343,920                                                         | 0           | 0                            | 6,343,920                   |                             | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             | 4,696,203                                                         | 0           | 0                            | 0                           | 4,696,203                   | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             | 5,496,718                                                         | 0           | 0                            | 0                           | 0                           | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              | 7,477,816                                                         | 0           | 0                            | 0                           | 0                           | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          | 1,335,586                                                         | 0           | 0                            | 0                           | 0                           | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          | 866,827                                                           | 0           | 0                            | 0                           | 0                           | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 | 346,213                                                           | 0           | 0                            | 0                           | 0                           | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       | 804,422                                                           | 0           | 0                            | 0                           | 0                           | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            | 1,606,287                                                         | 0           | 0                            | 0                           | 0                           | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     | 718,836                                                           | 0           | 0                            | 0                           | 0                           | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     | 0                                                                 | 0           | 0                            | 0                           | 0                           | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               | 49,982,252                                                        | 0           | 0                            | 0                           | 0                           | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             | 551,534                                                           | 0           | 0                            | 0                           | 0                           | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 | 31,147                                                            | 0           | 0                            | 0                           | 0                           | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    | 1,410,661                                                         | 0           | 0                            | 0                           | 0                           | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   | 17,971,484                                                        | 0           | 0                            | 0                           | 0                           | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            | 0                                                                 |             |                              |                             |                             | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     | 0                                                                 |             |                              |                             |                             | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 | 0                                                                 |             |                              |                             |                             | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   | 0                                                                 |             |                              |                             |                             | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              | 0                                                                 |             |                              |                             |                             | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         | 0                                                                 |             |                              |                             |                             | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                | 0                                                                 |             |                              |                             |                             | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       | 0                                                                 |             |                              |                             |                             | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              | 0                                                                 |             |                              |                             |                             | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 203,117,140                                                       | 0           | 0                            | 0                           | 0                           | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 86,171                                                            | 0           | 0                            | 0                           | 0                           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | -5,868,904                                                        | 0           | 0                            | 4,410,694                   | 0                           | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 8,333,118                                                         | 0           | 0                            | 0                           | 0                           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 5,813,233                                                         | 0           | 0                            | 0                           | 0                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 3,455,465                                                         | 0           | 0                            | 0                           | 0                           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 303,222                                                           | 0           | 0                            | 0                           | 0                           | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 79,455,740                                                        | 0           | 14,677                       | 0                           | 121,773                     | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 8,669,828                                                         | 0           | 0                            | 0                           | 0                           | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 14,558,967                                                        | 0           | 0                            | 0                           | 1,430                       | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 8,282,335                                                         | 0           | 2,303                        | 0                           | 0                           | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 127,960,643                                                       | 0           | 3,892                        | 453,982                     | 19,577                      | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 63,354,114                                                        | 0           | 502,210                      | 0                           | 859,327                     | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                                                                 | 0           | 0                            | 0                           | 0                           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 3,719,908                                                         | 0           | 11,739                       | 0                           | 5,834                       | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 22,095,320                                                        | 0           | 6,306                        | 0                           | 219,911                     | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 393,074                                                           | 0           | 0                            | 0                           | 0                           | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 8,555,152                                                         | 0           | 0                            | 0                           | 11,114                      | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 82,638                                                            | 0           | 0                            | 0                           | 0                           | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 15,035,238                                                        | 0           | 20,205                       | 0                           | 138,629                     | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 7,439                                                             | 0           | 0                            | 0                           | 0                           | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 17,688,378                                                        | 0           | 47,130                       | 0                           | 11,852                      | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 7,977,931                                                         | 0           | 10,563                       | 0                           | 0                           | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 13,924,955                                                        | 0           | 20,920                       | 0                           | 8,762                       | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 379,418                                                           | 0           | 0                            | 0                           | 0                           | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 87,587                                                            | 0           | 4,209                        | 0                           | 0                           | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 1,376,077                                                         | 0           | 62,522                       | 0                           | 31,752                      | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 2,229,544                                                         | 0           | 0                            | 0                           | 0                           | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | -21,398                                                           | 0           | 0                            | 0                           | 0                           | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 677,107                                                           | 0           | 0                            | 0                           | 0                           | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 1,615,703                                                         | 0           | 0                            | 0                           | 0                           | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                                                                 | 0           | 0                            | 0                           | 0                           | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 1,326,674                                                         | 0           | 0                            | 0                           | 0                           | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 2,403,758                                                         | 0           | 0                            | 0                           | 0                           | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | -1,147,630                                                        | 0           | 33,612                       | 0                           | 10,146                      | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 12,713,940                                                        | 0           | 0                            | 0                           | 385,288                     | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 16,694,987                                                        | 0           | 0                            | 0                           | 0                           | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                                                                 | 0           | 0                            | 0                           | 0                           | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | -21,844,736                                                       | 0           | 0                            | 0                           | 0                           | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 45,664,176                                                        | 0           | 0                            | 0                           | 245,414                     | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 7,548,229                                                         | 0           | 49,782                       | 0                           | 110,820                     | 22.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | Net Expenses<br>for Cost<br>Allocation<br>(from Wkst A<br>col. 7) | CAPITAL RELATED COSTS |                              |                             |                             |        |
|----------------------------------------|-------|----------------------------------------|-------------------------------------------------------------------|-----------------------|------------------------------|-----------------------------|-----------------------------|--------|
|                                        |       |                                        |                                                                   | BLDG & FIXT           | DEPRECIATION<br>OLD HOSPITAL | DEPRECIATION<br>DIRECT BLDG | DEPRECIATION<br>KELLOGG PAV |        |
|                                        |       |                                        | 0                                                                 | 1.00                  | 1.01                         | 1.02                        | 1.03                        |        |
| 23.00                                  | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT       | -406,081                                                          | 0                     | 0                            | 0                           | 0                           | 23.00  |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | -454,047                                                          | 0                     | 0                            | 0                           | 0                           | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | -594,857                                                          | 0                     | 0                            | 0                           | 0                           | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | -2,135,187                                                        | 0                     | 0                            | 0                           | 0                           | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | -1,372,287                                                        | 0                     | 0                            | 0                           | 0                           | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 240,601                                                           | 0                     | 0                            | 0                           | 0                           | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 552,044                                                           | 0                     | 0                            | 0                           | 22,436                      | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | -933,324                                                          | 0                     | 0                            | 0                           | 0                           | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | -311,121                                                          | 0                     | 0                            | 0                           | 0                           | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 637,435                                                           | 0                     | 0                            | 0                           | 0                           | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 361                                                               | 0                     | 0                            | 0                           | 0                           | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | -1,478,702                                                        | 0                     | 0                            | 0                           | 0                           | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                                   |                       |                              |                             |                             |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 63,852,606                                                        | 0                     | 62,982                       | 0                           | 580,641                     | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 16,934,397                                                        | 0                     | 0                            | 0                           | 0                           | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 19,080,339                                                        | 0                     | 0                            | 0                           | 0                           | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 5,780,277                                                         | 0                     | 0                            | 0                           | 270,432                     | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 11,970,492                                                        | 0                     | 0                            | 0                           | 0                           | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 4,489,057                                                         | 0                     | 0                            | 0                           | 428,154                     | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 4,444,418                                                         | 0                     | 0                            | 0                           | 0                           | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 3,295,759                                                         | 0                     | 0                            | 0                           | 0                           | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                                   |                       |                              |                             |                             |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 24,173,669                                                        | 0                     | 0                            | 0                           | 0                           | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 5,352,452                                                         | 0                     | 0                            | 0                           | 0                           | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 5,905,856                                                         | 0                     | 0                            | 0                           | 0                           | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 4,605,554                                                         | 0                     | 0                            | 0                           | 0                           | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 19,178,848                                                        | 0                     | 28,942                       | 0                           | 72,704                      | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 8,523,896                                                         | 0                     | 0                            | 0                           | 86,240                      | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 3,603,129                                                         | 0                     | 0                            | 0                           | 0                           | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 52,559,676                                                        | 0                     | 3,860                        | 0                           | 39,592                      | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 1,608,721                                                         | 0                     | 0                            | 0                           | 0                           | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 10,316,365                                                        | 0                     | 0                            | 0                           | 0                           | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 1,343                                                             | 0                     | 0                            | 0                           | 0                           | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 9,320,826                                                         | 0                     | 0                            | 0                           | 24,166                      | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 4,499,792                                                         | 0                     | 28,433                       | 0                           | 5,672                       | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 3,363,442                                                         | 0                     | 22,445                       | 0                           | 33,343                      | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 2,576,211                                                         | 0                     | 0                            | 0                           | 0                           | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 5,258,597                                                         | 0                     | 0                            | 0                           | 71,344                      | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 1,350,373                                                         | 0                     | 0                            | 0                           | 0                           | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 35,105,607                                                        | 0                     | 0                            | 0                           | 0                           | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 76,674,620                                                        | 0                     | 0                            | 0                           | 0                           | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 147,503,084                                                       | 0                     | 0                            | 0                           | 0                           | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 3,286,065                                                         | 0                     | 0                            | 0                           | 30,299                      | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 2,945,913                                                         | 0                     | 0                            | 0                           | 0                           | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                                   |                       |                              |                             |                             |        |
| 90.00                                  | 09000 | CLINIC                                 | 64,725,217                                                        | 0                     | 0                            | 0                           | 43,074                      | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 12,332,543                                                        | 0                     | 0                            | 0                           | 284,590                     | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                                   |                       |                              |                             |                             |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                                   |                       |                              |                             |                             |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 5,945,790                                                         | 0                     | 0                            | 0                           | 0                           | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 1,910,791                                                         | 0                     | 0                            | 0                           | 0                           | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 280,123                                                           | 0                     | 0                            | 0                           | 0                           | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                                                 | 0                     | 0                            | 0                           | 0                           | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 1,414,064,258                                                     | 0                     | 936,732                      | 4,864,676                   | 4,174,316                   | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                                   |                       |                              |                             |                             |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 3,185,320                                                         | 0                     | 0                            | 77,036                      | 0                           | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 9,578,735                                                         | 0                     | 0                            | 0                           | 0                           | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 1,981,312                                                         | 0                     | 0                            | 0                           | 0                           | 190.02 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                     | Net Expenses<br>for Cost<br>Allocation<br>(from Wkst A<br>col. 7) | CAPITAL RELATED COSTS |                              |                             |                             |        |
|-------------------------|-------|-------------------------------------|-------------------------------------------------------------------|-----------------------|------------------------------|-----------------------------|-----------------------------|--------|
|                         |       |                                     |                                                                   | BLDG & FIXT           | DEPRECIATION<br>OLD HOSPITAL | DEPRECIATION<br>DIRECT BLDG | DEPRECIATION<br>KELLOGG PAV |        |
|                         |       |                                     | 0                                                                 | 1.00                  | 1.01                         | 1.02                        | 1.03                        |        |
| 191.00                  | 19100 | RESEARCH                            | 41,343,215                                                        | 0                     | 0                            | 1,402,208                   | 3,482                       | 191.00 |
| 191.01                  | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY | 33,234,153                                                        | 0                     | 0                            | 0                           | 0                           | 191.01 |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH      | 4,989,462                                                         | 0                     | 0                            | 0                           | 10,907                      | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES         | 248,927,875                                                       | 0                     | 249,849                      | 0                           | 481,442                     | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                     | 23,438,888                                                        | 0                     | 13,454                       | 0                           | 26,056                      | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES             | 55,946,307                                                        | 0                     | 19,093                       | 0                           | 0                           | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                 | 1,865,158                                                         | 0                     | 0                            | 0                           | 0                           | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES           | 35,194,471                                                        | 0                     | 0                            | 0                           | 0                           | 194.03 |
| 194.04                  | 07954 | CON - GNE                           | 187,131                                                           | 0                     | 0                            | 0                           | 0                           | 194.04 |
| 200.00                  |       | Cross Foot Adjustments              |                                                                   |                       |                              |                             |                             | 200.00 |
| 201.00                  |       | Negative Cost Centers               |                                                                   | 0                     | 0                            | 0                           | 0                           | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201)   | 1,873,936,285                                                     | 0                     | 1,219,128                    | 6,343,920                   | 4,696,203                   | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

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11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS       |                            |                                |                                |                         |       |
|------------------------------|-------|--------------------------------------|-----------------------------|----------------------------|--------------------------------|--------------------------------|-------------------------|-------|
|                              |       |                                      | DEPRECIATION<br>JELKE SOUTH | DEPRECIATION<br>ATRIUM PAV | DEPRECIATION<br>PRO BLDG NORTH | DEPRECIATION<br>PRO BLDG SOUTH | DEPRECIATION<br>WOOD ST |       |
|                              |       |                                      | 1.04                        | 1.05                       | 1.06                           | 1.07                           | 1.08                    |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                             |                            |                                |                                |                         |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                             |                            |                                |                                |                         | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                             |                            |                                |                                |                         | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                             |                            |                                |                                |                         | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                             |                            |                                |                                |                         | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             | 5,496,718                   |                            |                                |                                |                         | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              | 0                           | 7,477,816                  |                                |                                |                         | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          | 0                           | 0                          | 1,335,586                      |                                |                         | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          | 0                           | 0                          | 0                              | 866,827                        |                         | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 | 0                           | 0                          | 0                              | 0                              | 346,213                 | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       | 0                           | 0                          | 0                              | 0                              | 0                       | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            | 0                           | 0                          | 0                              | 0                              | 0                       | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     | 0                           | 0                          | 0                              | 0                              | 0                       | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     | 0                           | 0                          | 0                              | 0                              | 0                       | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               | 0                           | 0                          | 0                              | 0                              | 0                       | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             | 0                           | 0                          | 0                              | 0                              | 0                       | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 | 0                           | 0                          | 0                              | 0                              | 0                       | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    | 0                           | 0                          | 0                              | 0                              | 0                       | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   | 0                           | 0                          | 0                              | 0                              | 0                       | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                             |                            |                                |                                |                         | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                             |                            |                                |                                |                         | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                             |                            |                                |                                |                         | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                             |                            |                                |                                |                         | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                             |                            |                                |                                |                         | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                             |                            |                                |                                |                         | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                             |                            |                                |                                |                         | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                             |                            |                                |                                |                         | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                             |                            |                                |                                |                         | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                           | 59,819                     | 0                              | 0                              | 0                       | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                           | 0                          | 0                              | 0                              | 0                       | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0                           | 0                          | 3,163                          | 0                              | 0                       | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 17,711                      | 0                          | 118                            | 0                              | 0                       | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                           | 19,663                     | 0                              | 0                              | 0                       | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                           | 63,558                     | 95                             | 0                              | 0                       | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 92,308                      | 0                          | 0                              | 0                              | 0                       | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 144,259                     | 140,409                    | 3,731                          | 8,726                          | 0                       | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 73,623                      | 0                          | 0                              | 0                              | 0                       | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 7,404                       | 0                          | 292                            | 1,964                          | 0                       | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 152,555                     | 0                          | 0                              | 0                              | 0                       | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 41,602                      | 74,335                     | 39                             | 0                              | 109,232                 | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 1,636,417                   | 1,750,053                  | 138,343                        | 186,565                        | 60,416                  | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                           | 0                          | 0                              | 0                              | 0                       | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 3,733                       | 19,178                     | 0                              | 0                              | 0                       | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 7,715                       | 72,258                     | 1,617                          | 2,544                          | 1,528                   | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                           | 0                          | 0                              | 0                              | 0                       | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                           | 498,100                    | 0                              | 0                              | 0                       | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 36,355                      | 117,999                    | 2,666                          | 0                              | 0                       | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 30,341                      | 0                          | 0                              | 0                              | 0                       | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                           | 109,253                    | 0                              | 0                              | 0                       | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                           | 254,992                    | 434                            | 0                              | 0                       | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                           | 0                          | 0                              | 0                              | 0                       | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                           | 34,064                     | 434                            | 0                              | 0                       | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                           | 0                          | 0                              | 0                              | 0                       | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                           | 0                          | 0                              | 0                              | 0                       | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                           | 0                          | 7,060                          | 0                              | 0                       | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 49,089                      | 25,109                     | 3,589                          | 0                              | 0                       | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                           | 0                          | 0                              | 0                              | 0                       | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 279,393                     | 0                          | 0                              | 0                              | 0                       | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                           | 0                          | 0                              | 0                              | 0                       | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                           | 0                          | 0                              | 0                              | 0                       | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                           | 0                          | 2,311                          | 1,883                          | 0                       | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 21,651                      | 0                          | 0                              | 0                              | 0                       | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 23,642                      | 0                          | 0                              | 0                              | 0                       | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                           | 0                          | 8,094                          | 706                            | 0                       | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                           | 11,078                     | 0                              | 0                              | 0                       | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                           | 0                          | 0                              | 0                              | 0                       | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                           | 0                          | 0                              | 0                              | 0                       | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                           | 34,548                     | 0                              | 0                              | 0                       | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 54,025                      | 0                          | 2,698                          | 9,785                          | 0                       | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                           | 0                          | 1,767                          | 0                              | 0                       | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                           | 0                          | 0                              | 0                              | 0                       | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                           | 0                          | 0                              | 0                              | 0                       | 23.02 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
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Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS       |                            |                                |                                |                         |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------|----------------------------|--------------------------------|--------------------------------|-------------------------|--------|
|                                        |       |                                        | DEPRECIATION<br>JELKE SOUTH | DEPRECIATION<br>ATRIUM PAV | DEPRECIATION<br>PRO BLDG NORTH | DEPRECIATION<br>PRO BLDG SOUTH | DEPRECIATION<br>WOOD ST |        |
|                                        |       |                                        | 1.04                        | 1.05                       | 1.06                           | 1.07                           | 1.08                    |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                           | 0                          | 4,962                          | 0                              | 0                       | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                           | 0                          | 1,736                          | 0                              | 0                       | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                           | 12,578                     | 0                              | 0                              | 0                       | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                           | 4,870                      | 0                              | 0                              | 0                       | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                           | 0                          | 0                              | 0                              | 0                       | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                           | 0                          | 0                              | 0                              | 0                       | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                           | 3,739                      | 0                              | 0                              | 0                       | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                           | 0                          | 0                              | 0                              | 0                       | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                           | 0                          | 0                              | 0                              | 0                       | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                             |                            |                                |                                |                         |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                           | 1,862,535                  | 0                              | 0                              | 0                       | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                           | 0                          | 0                              | 0                              | 0                       | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                           | 0                          | 0                              | 0                              | 0                       | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                           | 28,132                     | 0                              | 0                              | 0                       | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                           | 0                          | 0                              | 0                              | 0                       | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                           | 0                          | 0                              | 0                              | 0                       | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                           | 0                          | 0                              | 0                              | 0                       | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                           | 339,182                    | 0                              | 0                              | 0                       | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                             |                            |                                |                                |                         |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 79,326                      | 424,018                    | 0                              | 0                              | 0                       | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                           | 177,034                    | 0                              | 0                              | 0                       | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                           | 0                          | 0                              | 0                              | 0                       | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 145,856                     | 33,487                     | 0                              | 0                              | 0                       | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 156,848                     | 0                          | 63,646                         | 25,011                         | 0                       | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 9,934                       | 408,509                    | 0                              | 0                              | 0                       | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                           | 0                          | 0                              | 0                              | 0                       | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 644,687                     | 707,189                    | 66,627                         | 46,438                         | 0                       | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 29,885                      | 0                          | 0                              | 0                              | 0                       | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                           | 0                          | 0                              | 0                              | 0                       | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 32,622                      | 0                          | 0                              | 4,843                          | 0                       | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                           | 0                          | 0                              | 0                              | 0                       | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                           | 20,655                     | 0                              | 0                              | 0                       | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                           | 17,516                     | 0                              | 11,044                         | 0                       | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                           | 0                          | 0                              | 27,202                         | 0                       | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                           | 0                          | 0                              | 0                              | 0                       | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                           | 28,756                     | 0                              | 0                              | 0                       | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                           | 0                          | 0                              | 0                              | 0                       | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                           | 0                          | 0                              | 0                              | 0                       | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                           | 0                          | 0                              | 0                              | 0                       | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                           | 0                          | 0                              | 0                              | 0                       | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                           | 0                          | 0                              | 0                              | 0                       | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                           | 17,678                     | 0                              | 0                              | 0                       | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                           | 0                          | 0                              | 9,333                          | 0                       | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                             |                            |                                |                                |                         |        |
| 90.00                                  | 09000 | CLINIC                                 | 10,763                      | 0                          | 301,480                        | 170,986                        | 22,690                  | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                           | 0                          | 0                              | 0                              | 0                       | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                           | 0                          | 0                              | 0                              | 0                       | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                           | 0                          | 0                              | 0                              | 0                       | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                           | 0                          | 0                              | 0                              | 0                       | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                             |                            |                                |                                |                         |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                           | 0                          | 0                              | 0                              | 0                       | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                           | 0                          | 0                              | 0                              | 0                       | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                           | 0                          | 0                              | 0                              | 0                       | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                             |                            |                                |                                |                         |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                           | 0                          | 0                              | 0                              | 0                       | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                           | 0                          | 0                              | 0                              | 0                       | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                           | 0                          | 0                              | 0                              | 0                       | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                           | 0                          | 0                              | 0                              | 0                       | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                           | 0                          | 0                              | 0                              | 0                       | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                           | 0                          | 0                              | 0                              | 0                       | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                           | 0                          | 0                              | 0                              | 0                       | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 3,781,744                   | 7,370,294                  | 614,902                        | 507,030                        | 193,866                 | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                             |                            |                                |                                |                         |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                           | 45,764                     | 11,084                         | 18,910                         | 0                       | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                           | 0                          | 0                              | 0                              | 0                       | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                           | 0                          | 0                              | 0                              | 0                       | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 1,283,919                   | 0                          | 757                            | 14,710                         | 0                       | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 16,736                      | 0                          | 1,830                          | 22,495                         | 0                       | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 175,139                     | 0                          | 1,104                          | 16,991                         | 0                       | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 194,115                     | 61,758                     | 526,450                        | 207,159                        | 152,347                 | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 45,065                      | 0                          | 0                              | 0                              | 0                       | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                           | 0                          | 37,960                         | 0                              | 0                       | 194.01 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | CAPITAL RELATED COSTS       |                            |                                |                                |                         |        |
|-------------------------|-------|-----------------------------------|-----------------------------|----------------------------|--------------------------------|--------------------------------|-------------------------|--------|
|                         |       |                                   | DEPRECIATION<br>JELKE SOUTH | DEPRECIATION<br>ATRIUM PAV | DEPRECIATION<br>PRO BLDG NORTH | DEPRECIATION<br>PRO BLDG SOUTH | DEPRECIATION<br>WOOD ST |        |
|                         |       |                                   | 1.04                        | 1.05                       | 1.06                           | 1.07                           | 1.08                    |        |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                           | 0                          | 141,499                        | 79,532                         | 0                       | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                           | 0                          | 0                              | 0                              | 0                       | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                           | 0                          | 0                              | 0                              | 0                       | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                             |                            |                                |                                |                         | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                           | 0                          | 0                              | 0                              | 0                       | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 5,496,718                   | 7,477,816                  | 1,335,586                      | 866,827                        | 346,213                 | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                              | CAPITAL RELATED COSTS                |                              |                     |                     |                           |            |       |
|-------------------------|------------------------------|--------------------------------------|------------------------------|---------------------|---------------------|---------------------------|------------|-------|
|                         |                              | DEPRECIATION<br>ACADEMIC<br>FACILITY | DEPRECIATION<br>PRO BLDG III | DEPRECIATION<br>JRB | DEPRECIATION<br>TOB | DEPRECIATION<br>EQUIPMENT |            |       |
|                         |                              | 1.09                                 | 1.10                         | 1.11                | 1.12                | 1.13                      |            |       |
|                         | GENERAL SERVICE COST CENTERS |                                      |                              |                     |                     |                           |            |       |
| 1.00                    | 00100                        | CAP REL COSTS-BLDG & FIXT            |                              |                     |                     |                           |            | 1.00  |
| 1.01                    | 00101                        | DEPRECIATION OLD HOSPITAL            |                              |                     |                     |                           |            | 1.01  |
| 1.02                    | 00102                        | DEPRECIATION DIRECT BLDG             |                              |                     |                     |                           |            | 1.02  |
| 1.03                    | 00103                        | DEPRECIATION KELLOGG PAV             |                              |                     |                     |                           |            | 1.03  |
| 1.04                    | 00104                        | DEPRECIATION JELKE SOUTH             |                              |                     |                     |                           |            | 1.04  |
| 1.05                    | 00105                        | DEPRECIATION ATRIUM PAV              |                              |                     |                     |                           |            | 1.05  |
| 1.06                    | 00106                        | DEPRECIATION PRO BLDG NORTH          |                              |                     |                     |                           |            | 1.06  |
| 1.07                    | 00107                        | DEPRECIATION PRO BLDG SOUTH          |                              |                     |                     |                           |            | 1.07  |
| 1.08                    | 00108                        | DEPRECIATION WOOD ST                 |                              |                     |                     |                           |            | 1.08  |
| 1.09                    | 00109                        | DEPRECIATION ACADEMIC FACILITY       | 804,422                      |                     |                     |                           |            | 1.09  |
| 1.10                    | 00110                        | DEPRECIATION PRO BLDG III            | 0                            | 1,606,287           |                     |                           |            | 1.10  |
| 1.11                    | 00111                        | DEPRECIATION JRB                     | 0                            | 0                   | 718,836             |                           |            | 1.11  |
| 1.12                    | 00112                        | DEPRECIATION TOB                     | 0                            | 0                   | 0                   | 0                         |            | 1.12  |
| 1.13                    | 00113                        | DEPRECIATION EQUIPMENT               | 0                            | 0                   | 0                   | 0                         | 49,982,252 | 1.13  |
| 1.14                    | 00114                        | DEPRECIATION ORTHOPEDICS             | 0                            | 0                   | 0                   | 0                         | 0          | 1.14  |
| 1.15                    | 00115                        | DEPRECIATION KIDSTON                 | 0                            | 0                   | 0                   | 0                         | 0          | 1.15  |
| 1.16                    | 00116                        | DEPRECIATION COHN                    | 0                            | 0                   | 0                   | 0                         | 0          | 1.16  |
| 1.17                    | 00117                        | DEPRECIATION TOWER                   | 0                            | 0                   | 0                   | 0                         | 0          | 1.17  |
| 2.00                    | 00200                        | CAP REL COSTS-MVBLE EQUIP            |                              |                     |                     |                           |            | 2.00  |
| 2.01                    | 00201                        | INTEREST GENERAL                     |                              |                     |                     |                           |            | 2.01  |
| 2.02                    | 00202                        | INTEREST DIRECT BLDG                 |                              |                     |                     |                           |            | 2.02  |
| 2.03                    | 00203                        | INTEREST ATRUM PAV                   |                              |                     |                     |                           |            | 2.03  |
| 2.04                    | 00204                        | INTEREST PRO BLDG SOUTH              |                              |                     |                     |                           |            | 2.04  |
| 2.05                    | 00205                        | INTEREST TOB                         |                              |                     |                     |                           |            | 2.05  |
| 2.06                    | 00206                        | INTEREST PRO BLDG III                |                              |                     |                     |                           |            | 2.06  |
| 2.07                    | 00207                        | INTEREST TOWER                       |                              |                     |                     |                           |            | 2.07  |
| 2.08                    | 00208                        | INTEREST PRO BLDG NORTH              |                              |                     |                     |                           |            | 2.08  |
| 4.00                    | 00400                        | EMPLOYEE BENEFITS DEPARTMENT         | 370                          | 0                   | 0                   | 0                         | 297,310    | 4.00  |
| 5.01                    | 00590                        | TRANSITION RECRUITMENT               | 0                            | 0                   | 0                   | 0                         | 0          | 5.01  |
| 5.02                    | 00540                        | PARKING GARAGE                       | 0                            | 0                   | 0                   | 0                         | 10,867     | 5.02  |
| 5.03                    | 00591                        | RESEARCH ADMINISTRATION              | 466                          | 0                   | 0                   | 0                         | 85,251     | 5.03  |
| 5.04                    | 00592                        | ADMIN & GEN INPT SERVICE             | 0                            | 0                   | 0                   | 0                         | 68,075     | 5.04  |
| 5.05                    | 00593                        | ADMIN & GEN OUTPT SERVICE            | 0                            | 0                   | 0                   | 0                         | 71,611     | 5.05  |
| 5.06                    | 00594                        | ADMIN & GEN ANIMAL LAB               | 1,253                        | 0                   | 0                   | 0                         | 259,258    | 5.06  |
| 5.07                    | 00595                        | ADMIN & GEN PT SERVICE               | 4,267                        | 13,597              | 3,852               | 0                         | 1,847,472  | 5.07  |
| 5.08                    | 00596                        | PERSONNEL DEPARTMENT                 | 3,567                        | 0                   | 0                   | 0                         | 77,563     | 5.08  |
| 5.09                    | 00597                        | RESEARCH FACULTY                     | 0                            | 0                   | 0                   | 0                         | 18,539     | 5.09  |
| 5.10                    | 00598                        | RESEARCH SPA                         | 1,562                        | 0                   | 0                   | 0                         | 156,878    | 5.10  |
| 5.11                    | 00560                        | CORPORATE ADMINISTRATION             | 69,005                       | 57,476              | 26,036              | 0                         | 2,007,611  | 5.11  |
| 6.00                    | 00600                        | MAINTENANCE & REPAIRS                | 192,610                      | 275,967             | 66,312              | 0                         | 8,541,448  | 6.00  |
| 6.01                    | 00601                        | RENTED SPACE COSTS                   | 0                            | 0                   | 0                   | 0                         | 0          | 6.01  |
| 8.00                    | 00800                        | LAUNDRY & LINEN SERVICE              | 0                            | 0                   | 0                   | 0                         | 141,940    | 8.00  |
| 9.00                    | 00900                        | HOUSEKEEPING                         | 1,756                        | 19,319              | 12,790              | 0                         | 851,379    | 9.00  |
| 10.00                   | 01000                        | DIETARY                              | 0                            | 0                   | 0                   | 0                         | 76,606     | 10.00 |
| 10.01                   | 01001                        | PATIENT FOOD SERVICE                 | 0                            | 0                   | 1,682               | 0                         | 416,899    | 10.01 |
| 11.00                   | 01100                        | CAFETERIA                            | 68,279                       | 0                   | 0                   | 0                         | 611,164    | 11.00 |
| 13.00                   | 01300                        | NURSING ADMINISTRATION               | 8,158                        | 0                   | 6,832               | 0                         | 230,014    | 13.00 |
| 14.00                   | 01400                        | CENTRAL SERVICES & SUPPLY            | 0                            | 0                   | 4,546               | 0                         | 558,060    | 14.00 |
| 15.00                   | 01500                        | PHARMACY                             | 0                            | 0                   | 0                   | 0                         | 275,640    | 15.00 |
| 16.00                   | 01600                        | MEDICAL RECORDS & LIBRARY            | 3,610                        | 0                   | 0                   | 0                         | 198,661    | 16.00 |
| 16.01                   | 01601                        | MEDICAL RECORDS & LIBRARY            | 0                            | 0                   | 3,750               | 0                         | 173,017    | 16.01 |
| 18.00                   | 01850                        | CLINICAL LAB ADMIN MED               | 0                            | 0                   | 0                   | 0                         | 0          | 18.00 |
| 18.01                   | 01080                        | CLINICAL LAB ADMIN PED               | 327                          | 0                   | 0                   | 0                         | 6,131      | 18.01 |
| 18.02                   | 01851                        | CLINICAL LAB ADMIN OB                | 0                            | 0                   | 0                   | 0                         | 100,709    | 18.02 |
| 18.03                   | 01852                        | CLINICAL LAB ADMIN SURG              | 0                            | 3,677               | 0                   | 0                         | 83,224     | 18.03 |
| 18.04                   | 01853                        | CLINICAL LAB ADMIN PSYCH             | 0                            | 0                   | 0                   | 0                         | 77,239     | 18.04 |
| 18.05                   | 01854                        | CLINICAL LAB ADMIN PATH              | 0                            | 0                   | 0                   | 0                         | 218,514    | 18.05 |
| 18.06                   | 01855                        | CLINICAL LAB ADMIN CARD              | 0                            | 0                   | 0                   | 0                         | 0          | 18.06 |
| 18.07                   | 01856                        | CLINICAL LAB ADMIN HEMAT             | 0                            | 0                   | 0                   | 0                         | 0          | 18.07 |
| 18.08                   | 01857                        | CLINICAL LAB ADMIN NEUR              | 0                            | 0                   | 0                   | 0                         | 8,126      | 18.08 |
| 18.09                   | 01858                        | CLINICAL LAB ADMIN OCLS              | 0                            | 0                   | 0                   | 0                         | 16,934     | 18.09 |
| 18.12                   | 01859                        | DISCRETIONARY OPERATIONS             | 0                            | 0                   | 0                   | 0                         | 59,949     | 18.12 |
| 18.14                   | 01860                        | RUSH UNIVERSITY ADMIN SPLIT          | 226,571                      | 0                   | 0                   | 0                         | 1,688,307  | 18.14 |
| 18.16                   | 01861                        | NURSING SCHOOL SPLIT                 | 50,921                       | 0                   | 0                   | 0                         | 293,287    | 18.16 |
| 19.00                   | 01900                        | NONPHYSICIAN ANESTHETISTS            | 0                            | 0                   | 0                   | 0                         | 0          | 19.00 |
| 20.00                   | 02000                        | NURSING SCHOOL                       | 0                            | 0                   | 0                   | 0                         | 0          | 20.00 |
| 21.00                   | 02100                        | I&R SERVICES-SALARY & FRINGES APPRVD | 4,041                        | 0                   | 0                   | 0                         | 324,559    | 21.00 |
| 22.00                   | 02200                        | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                            | 3,528               | 0                   | 0                         | 314,065    | 22.00 |
| 23.00                   | 02300                        | PARAMED HEALTH SYSTEM MANAGEMENT     | 9,978                        | 0                   | 0                   | 0                         | 92,031     | 23.00 |
| 23.01                   | 02301                        | PARAMED MEDICAL PERFUSION TECH       | 856                          | 0                   | 0                   | 0                         | 4,801      | 23.01 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS                |                              |                     |                     |                           |        |
|----------------------------------------|-------|----------------------------------------|--------------------------------------|------------------------------|---------------------|---------------------|---------------------------|--------|
|                                        |       |                                        | DEPRECIATION<br>ACADEMIC<br>FACILITY | DEPRECIATION<br>PRO BLDG III | DEPRECIATION<br>JRB | DEPRECIATION<br>TOB | DEPRECIATION<br>EQUIPMENT |        |
|                                        |       |                                        | 1.09                                 | 1.10                         | 1.11                | 1.12                | 1.13                      |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 2,823                                | 0                            | 0                   | 0                   | 15,831                    | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 5,627                                | 0                            | 0                   | 0                   | 64,847                    | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 5,207                                | 0                            | 0                   | 0                   | 32,764                    | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                                    | 0                            | 0                   | 0                   | 8,840                     | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                                    | 0                            | 0                   | 0                   | 42,366                    | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 2,638                                | 0                            | 0                   | 0                   | 14,792                    | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 532                                  | 0                            | 0                   | 0                   | 2,984                     | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                                    | 0                            | 0                   | 0                   | 2,628                     | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 2,890                                | 0                            | 0                   | 0                   | 16,204                    | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 2,170                                | 0                            | 0                   | 0                   | 12,165                    | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                      |                              |                     |                     |                           |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                    | 0                            | 0                   | 0                   | 4,016,665                 | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                    | 0                            | 0                   | 0                   | 697,842                   | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 10,009                               | 0                            | 0                   | 0                   | 739,755                   | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                    | 0                            | 0                   | 0                   | 209,998                   | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                    | 0                            | 0                   | 0                   | 597,052                   | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                    | 0                            | 50,209              | 0                   | 428,009                   | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                    | 0                            | 156,285             | 0                   | 394,807                   | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                    | 0                            | 0                   | 0                   | 238,383                   | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                      |                              |                     |                     |                           |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 31,721                               | 6,923                        | 0                   | 0                   | 1,919,813                 | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                    | 0                            | 0                   | 0                   | 492,467                   | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                    | 0                            | 0                   | 0                   | 346,261                   | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 1,820                                | 8,339                        | 0                   | 0                   | 261,675                   | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                    | 95,997                       | 0                   | 0                   | 1,349,118                 | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                    | 0                            | 0                   | 0                   | 373,656                   | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                    | 0                            | 0                   | 0                   | 97,514                    | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 6,188                                | 10,997                       | 0                   | 0                   | 1,596,130                 | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                    | 0                            | 0                   | 0                   | 23,373                    | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                    | 0                            | 0                   | 0                   | 0                         | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                    | 0                            | 0                   | 0                   | 81,440                    | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                    | 0                            | 0                   | 0                   | 0                         | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                    | 0                            | 0                   | 0                   | 108,803                   | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                    | 0                            | 38,742              | 0                   | 202,537                   | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                    | 0                            | 33,490              | 0                   | 181,970                   | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                    | 0                            | 2,973               | 0                   | 122,184                   | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                    | 0                            | 0                   | 0                   | 241,221                   | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                    | 0                            | 0                   | 0                   | 39,820                    | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                    | 0                            | 0                   | 0                   | 0                         | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                    | 0                            | 0                   | 0                   | 0                         | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                    | 0                            | 0                   | 0                   | 0                         | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                    | 0                            | 0                   | 0                   | 0                         | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                    | 0                            | 0                   | 0                   | 33,737                    | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                    | 0                            | 25,008              | 0                   | 233,955                   | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                      |                              |                     |                     |                           |        |
| 90.00                                  | 09000 | CLINIC                                 | 3,414                                | 442,341                      | 29,657              | 0                   | 2,152,438                 | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                    | 0                            | 0                   | 0                   | 824,487                   | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                    | 0                            | 0                   | 0                   | 0                         | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                    | 0                            | 0                   | 0                   | 0                         | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                    | 0                            | 0                   | 0                   | 0                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                      |                              |                     |                     |                           |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                    | 0                            | 0                   | 0                   | 0                         | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                    | 0                            | 0                   | 0                   | 0                         | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                    | 0                            | 0                   | 0                   | 0                         | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                      |                              |                     |                     |                           |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                                    | 11,245                       | 0                   | 0                   | 26,584                    | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                    | 0                            | 0                   | 0                   | 0                         | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                                    | 3,494                        | 0                   | 0                   | 8,207                     | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                    | 0                            | 0                   | 0                   | 0                         | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                    | 33                           | 0                   | 0                   | 65                        | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                    | 0                            | 0                   | 0                   | 0                         | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                    | 0                            | 0                   | 0                   | 0                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 722,636                              | 952,933                      | 462,164             | 0                   | 38,516,526                | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                      |                              |                     |                     |                           |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 3,489                                | 0                            | 183,766             | 0                   | 764,214                   | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                    | 0                            | 0                   | 0                   | 0                         | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                    | 0                            | 0                   | 0                   | 106,062                   | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 16,556                               | 580                          | 1,746               | 0                   | 2,673,387                 | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 2,685                                | 12,785                       | 3,178               | 0                   | 234,798                   | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 3,642                                | 1,226                        | 13,670              | 0                   | 434,546                   | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 6,185                                | 626,309                      | 44,989              | 0                   | 6,294,353                 | 192.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | CAPITAL RELATED COSTS                |                              |                     |                     |                           |        |
|-------------------------|-------|-----------------------------------|--------------------------------------|------------------------------|---------------------|---------------------|---------------------------|--------|
|                         |       |                                   | DEPRECIATION<br>ACADEMIC<br>FACILITY | DEPRECIATION<br>PRO BLDG III | DEPRECIATION<br>JRB | DEPRECIATION<br>TOB | DEPRECIATION<br>EQUIPMENT |        |
|                         |       |                                   | 1.09                                 | 1.10                         | 1.11                | 1.12                | 1.13                      |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                   | 49,229                               | 0                            | 9,323               | 0                   | 402,982                   | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           | 0                                    | 12,454                       | 0                   | 0                   | 121,941                   | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                                    | 0                            | 0                   | 0                   | 433,443                   | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                                    | 0                            | 0                   | 0                   | 0                         | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                                    | 0                            | 0                   | 0                   | 0                         | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                                      |                              |                     |                     |                           | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                                    | 0                            | 0                   | 0                   | 0                         | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 804,422                              | 1,606,287                    | 718,836             | 0                   | 49,982,252                | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS       |                         |                      |                       |             | 11/24/2019 4:22 pm |  |
|------------------------------|-------|--------------------------------------|-----------------------------|-------------------------|----------------------|-----------------------|-------------|--------------------|--|
|                              |       |                                      | DEPRECIATION<br>ORTHOPEDICS | DEPRECIATION<br>KIDSTON | DEPRECIATION<br>COHN | DEPRECIATION<br>TOWER | MVBLE EQUIP |                    |  |
|                              |       |                                      | 1.14                        | 1.15                    | 1.16                 | 1.17                  | 2.00        |                    |  |
| GENERAL SERVICE COST CENTERS |       |                                      |                             |                         |                      |                       |             |                    |  |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                             |                         |                      |                       |             | 1.00               |  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                             |                         |                      |                       |             | 1.01               |  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                             |                         |                      |                       |             | 1.02               |  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                             |                         |                      |                       |             | 1.03               |  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                             |                         |                      |                       |             | 1.04               |  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                             |                         |                      |                       |             | 1.05               |  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                             |                         |                      |                       |             | 1.06               |  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                             |                         |                      |                       |             | 1.07               |  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                             |                         |                      |                       |             | 1.08               |  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                             |                         |                      |                       |             | 1.09               |  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                             |                         |                      |                       |             | 1.10               |  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                             |                         |                      |                       |             | 1.11               |  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                             |                         |                      |                       |             | 1.12               |  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                             |                         |                      |                       |             | 1.13               |  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             | 551,534                     |                         |                      |                       |             | 1.14               |  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 | 0                           | 31,147                  |                      |                       |             | 1.15               |  |
| 1.16                         | 00116 | DEPRECIATION COHN                    | 0                           | 0                       | 1,410,661            |                       |             | 1.16               |  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   | 0                           | 0                       | 0                    | 17,971,484            |             | 1.17               |  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                             |                         |                      |                       | 0           | 2.00               |  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                             |                         |                      |                       | 0           | 2.01               |  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                             |                         |                      |                       | 0           | 2.02               |  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                             |                         |                      |                       | 0           | 2.03               |  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                             |                         |                      |                       | 0           | 2.04               |  |
| 2.05                         | 00205 | INTEREST TOB                         |                             |                         |                      |                       | 0           | 2.05               |  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                             |                         |                      |                       | 0           | 2.06               |  |
| 2.07                         | 00207 | INTEREST TOWER                       |                             |                         |                      |                       | 0           | 2.07               |  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                             |                         |                      |                       | 0           | 2.08               |  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                           | 0                       | 0                    | 0                     | 0           | 4.00               |  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                           | 0                       | 0                    | 0                     | 0           | 5.01               |  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0                           | 0                       | 0                    | 6,757                 | 0           | 5.02               |  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                           | 0                       | 30,185               | 0                     | 0           | 5.03               |  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                           | 2,649                   | 0                    | 0                     | 0           | 5.04               |  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                           | 0                       | 0                    | 41,577                | 0           | 5.05               |  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                           | 0                       | 138,946              | 0                     | 0           | 5.06               |  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 6,188                       | 2,597                   | 0                    | 652,192               | 0           | 5.07               |  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                           | 0                       | 0                    | 0                     | 0           | 5.08               |  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                           | 0                       | 0                    | 0                     | 0           | 5.09               |  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                           | 0                       | 21,920               | 0                     | 0           | 5.10               |  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 114,819                     | 4,772                   | 60,343               | 25,465                | 0           | 5.11               |  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 53,458                      | 6,550                   | 77,036               | 2,703,521             | 0           | 6.00               |  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                           | 0                       | 0                    | 0                     | 0           | 6.01               |  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 15,386                      | 0                       | 0                    | 89,583                | 0           | 8.00               |  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 116,023                     | 108                     | 9,197                | 203,648               | 0           | 9.00               |  |
| 10.00                        | 01000 | DIETARY                              | 0                           | 0                       | 0                    | 0                     | 0           | 10.00              |  |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                           | 0                       | 0                    | 85,120                | 0           | 10.01              |  |
| 11.00                        | 01100 | CAFETERIA                            | 0                           | 0                       | 513                  | 128,411               | 0           | 11.00              |  |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                           | 0                       | 0                    | 39,131                | 0           | 13.00              |  |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                           | 0                       | 0                    | 730,303               | 0           | 14.00              |  |
| 15.00                        | 01500 | PHARMACY                             | 0                           | 0                       | 0                    | 60,714                | 0           | 15.00              |  |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 49,770                      | 0                       | 0                    | 0                     | 0           | 16.00              |  |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                           | 5,426                   | 0                    | 0                     | 0           | 16.01              |  |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                           | 0                       | 0                    | 0                     | 0           | 18.00              |  |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                           | 0                       | 0                    | 0                     | 0           | 18.01              |  |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                           | 0                       | 0                    | 0                     | 0           | 18.02              |  |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                           | 20                      | 0                    | 0                     | 0           | 18.03              |  |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                           | 0                       | 0                    | 0                     | 0           | 18.04              |  |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                           | 0                       | 0                    | 0                     | 0           | 18.05              |  |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                           | 0                       | 0                    | 0                     | 0           | 18.06              |  |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                           | 0                       | 0                    | 0                     | 0           | 18.07              |  |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                           | 0                       | 0                    | 0                     | 0           | 18.08              |  |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                           | 0                       | 0                    | 0                     | 0           | 18.09              |  |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                           | 0                       | 0                    | 0                     | 0           | 18.12              |  |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                           | 1,523                   | 0                    | 0                     | 0           | 18.14              |  |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                           | 0                       | 0                    | 0                     | 0           | 18.16              |  |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                           | 0                       | 0                    | 0                     | 0           | 19.00              |  |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                           | 0                       | 0                    | 0                     | 0           | 20.00              |  |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                           | 0                       | 0                    | 113,485               | 0           | 21.00              |  |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 395                         | 0                       | 0                    | 0                     | 0           | 22.00              |  |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                           | 0                       | 0                    | 0                     | 0           | 23.00              |  |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                           | 0                       | 0                    | 0                     | 0           | 23.01              |  |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                           | 0                       | 0                    | 0                     | 0           | 23.02              |  |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS       |                         |                      |                       |             |          |
|----------------------------------------|-------|----------------------------------------|-----------------------------|-------------------------|----------------------|-----------------------|-------------|----------|
|                                        |       |                                        | DEPRECIATION<br>ORTHOPEDICS | DEPRECIATION<br>KIDSTON | DEPRECIATION<br>COHN | DEPRECIATION<br>TOWER | MVBLE EQUIP |          |
|                                        |       |                                        | 1.14                        | 1.15                    | 1.16                 | 1.17                  | 2.00        |          |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 6,857                       | 0                       | 0                    | 0                     | 0           | 0 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                           | 1,130                   | 0                    | 0                     | 0           | 0 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                             |                         |                      |                       |             |          |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                           | 499                     | 0                    | 3,387,711             | 0           | 0 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                           | 0                       | 0                    | 1,084,777             | 0           | 0 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                           | 0                       | 0                    | 1,062,690             | 0           | 0 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                           | 0                       | 0                    | 0                     | 0           | 0 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                           | 0                       | 0                    | 928,101               | 0           | 0 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                           | 0                       | 0                    | 0                     | 0           | 0 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                           | 0                       | 0                    | 0                     | 0           | 0 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                           | 0                       | 0                    | 0                     | 0           | 0 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                             |                         |                      |                       |             |          |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                           | 0                       | 0                    | 2,127,069             | 0           | 0 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                           | 0                       | 0                    | 572,140               | 0           | 0 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                           | 0                       | 0                    | 538,253               | 0           | 0 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                           | 0                       | 0                    | 151,608               | 0           | 0 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                           | 0                       | 0                    | 1,162,963             | 0           | 0 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                           | 0                       | 2,634                | 23,247                | 0           | 0 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                           | 0                       | 0                    | 151,582               | 0           | 0 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 2,129                       | 1,052                   | 1,229                | 269,102               | 0           | 0 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                           | 0                       | 0                    | 0                     | 0           | 0 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                           | 0                       | 0                    | 0                     | 0           | 0 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                           | 0                       | 0                    | 73,446                | 0           | 0 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                           | 0                       | 0                    | 0                     | 0           | 0 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                           | 0                       | 0                    | 120,141               | 0           | 0 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                           | 0                       | 0                    | 61,470                | 0           | 0 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                           | 0                       | 0                    | 3,505                 | 0           | 0 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 33,835                      | 0                       | 0                    | 1,109                 | 0           | 0 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                           | 0                       | 0                    | 265,546               | 0           | 0 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                           | 0                       | 0                    | 61,899                | 0           | 0 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                           | 0                       | 0                    | 0                     | 0           | 0 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                           | 0                       | 0                    | 0                     | 0           | 0 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                           | 0                       | 0                    | 0                     | 0           | 0 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                           | 0                       | 0                    | 0                     | 0           | 0 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                           | 0                       | 0                    | 0                     | 0           | 0 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                           | 0                       | 0                    | 34,845                | 0           | 0 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                             |                         |                      |                       |             |          |
| 90.00                                  | 09000 | CLINIC                                 | 59,333                      | 0                       | 0                    | 1,740                 | 0           | 0 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                           | 0                       | 0                    | 970,460               | 0           | 0 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                           | 0                       | 0                    | 0                     | 0           | 0 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                           | 0                       | 0                    | 0                     | 0           | 0 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                           | 0                       | 0                    | 0                     | 0           | 0 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                             |                         |                      |                       |             |          |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                           | 0                       | 0                    | 0                     | 0           | 0 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                           | 0                       | 0                    | 0                     | 0           | 0 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                           | 0                       | 0                    | 0                     | 0           | 0 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                             |                         |                      |                       |             |          |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                           | 223                     | 0                    | 0                     | 0           | 0 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                           | 0                       | 0                    | 0                     | 0           | 0 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                           | 66                      | 0                    | 0                     | 0           | 0 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                           | 0                       | 0                    | 0                     | 0           | 0 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                           | 0                       | 0                    | 0                     | 0           | 0 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                           | 0                       | 0                    | 0                     | 0           | 0 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                           | 0                       | 0                    | 0                     | 0           | 0 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 458,193                     | 26,615                  | 342,003              | 17,933,311            | 0           | 0 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                             |                         |                      |                       |             |          |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                           | 0                       | 0                    | 32,223                | 0           | 0 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                           | 0                       | 0                    | 0                     | 0           | 0 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                           | 0                       | 0                    | 0                     | 0           | 0 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 197                         | 70                      | 936,061              | 0                     | 0           | 0 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 188                         | 1,653                   | 729                  | 0                     | 0           | 0 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 3,954                       | 70                      | 105,762              | 0                     | 0           | 0 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 89,002                      | 2,015                   | 11,709               | 5,950                 | 0           | 0 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                           | 724                     | 14,397               | 0                     | 0           | 0 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                           | 0                       | 0                    | 0                     | 0           | 0 194.01 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | CAPITAL RELATED COSTS       |                         |                      |                       |             |          |
|-------------------------|-------|-----------------------------------|-----------------------------|-------------------------|----------------------|-----------------------|-------------|----------|
|                         |       |                                   | DEPRECIATION<br>ORTHOPEDICS | DEPRECIATION<br>KIDSTON | DEPRECIATION<br>COHN | DEPRECIATION<br>TOWER | MVBLE EQUIP |          |
|                         |       |                                   | 1.14                        | 1.15                    | 1.16                 | 1.17                  | 2.00        |          |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                           | 0                       | 0                    | 0                     | 0           | 0 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                           | 0                       | 0                    | 0                     | 0           | 0 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                           | 0                       | 0                    | 0                     | 0           | 0 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                             |                         |                      |                       |             | 200.00   |
| 201.00                  |       | Negative Cost Centers             | 0                           | 0                       | 0                    | 0                     | 0           | 0 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 551,534                     | 31,147                  | 1,410,661            | 17,971,484            | 0           | 0 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS |                         |                       |                            |              |       |
|------------------------------|-------|--------------------------------------|-----------------------|-------------------------|-----------------------|----------------------------|--------------|-------|
|                              |       |                                      | INTEREST<br>GENERAL   | INTEREST<br>DIRECT BLDG | INTEREST ATRUM<br>PAV | INTEREST PRO<br>BLDG SOUTH | INTEREST TOB |       |
|                              |       |                                      | 2.01                  | 2.02                    | 2.03                  | 2.04                       | 2.05         |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                       |                         |                       |                            |              |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                       |                         |                       |                            |              | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                       |                         |                       |                            |              | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                       |                         |                       |                            |              | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                       |                         |                       |                            |              | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                       |                         |                       |                            |              | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                       |                         |                       |                            |              | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                       |                         |                       |                            |              | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                       |                         |                       |                            |              | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                       |                         |                       |                            |              | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                       |                         |                       |                            |              | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                       |                         |                       |                            |              | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                       |                         |                       |                            |              | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                       |                         |                       |                            |              | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                       |                         |                       |                            |              | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                       |                         |                       |                            |              | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                       |                         |                       |                            |              | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                       |                         |                       |                            |              | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                       |                         |                       |                            |              | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                       |                         |                       |                            |              | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     | 0                     |                         |                       |                            |              | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 | 0                     | 0                       |                       |                            |              | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   | 0                     | 0                       | 0                     |                            |              | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              | 0                     | 0                       | 0                     | 0                          |              | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         | 0                     | 0                       | 0                     | 0                          | 0            | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                | 0                     | 0                       | 0                     | 0                          | 0            | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       | 0                     | 0                       | 0                     | 0                          | 0            | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              | 0                     | 0                       | 0                     | 0                          | 0            | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                     | 0                       | 0                     | 0                          | 0            | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                     | 0                       | 0                     | 0                          | 0            | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0                     | 0                       | 0                     | 0                          | 0            | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                     | 0                       | 0                     | 0                          | 0            | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                     | 0                       | 0                     | 0                          | 0            | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                     | 0                       | 0                     | 0                          | 0            | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                     | 0                       | 0                     | 0                          | 0            | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 0                     | 0                       | 0                     | 0                          | 0            | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                     | 0                       | 0                     | 0                          | 0            | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                     | 0                       | 0                     | 0                          | 0            | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                     | 0                       | 0                     | 0                          | 0            | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 0                     | 0                       | 0                     | 0                          | 0            | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0                     | 0                       | 0                     | 0                          | 0            | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                     | 0                       | 0                     | 0                          | 0            | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                     | 0                       | 0                     | 0                          | 0            | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0                     | 0                       | 0                     | 0                          | 0            | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                     | 0                       | 0                     | 0                          | 0            | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                     | 0                       | 0                     | 0                          | 0            | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0                     | 0                       | 0                     | 0                          | 0            | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                     | 0                       | 0                     | 0                          | 0            | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                     | 0                       | 0                     | 0                          | 0            | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                     | 0                       | 0                     | 0                          | 0            | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                     | 0                       | 0                     | 0                          | 0            | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                     | 0                       | 0                     | 0                          | 0            | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                     | 0                       | 0                     | 0                          | 0            | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                     | 0                       | 0                     | 0                          | 0            | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                     | 0                       | 0                     | 0                          | 0            | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                     | 0                       | 0                     | 0                          | 0            | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                     | 0                       | 0                     | 0                          | 0            | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                     | 0                       | 0                     | 0                          | 0            | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                     | 0                       | 0                     | 0                          | 0            | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                     | 0                       | 0                     | 0                          | 0            | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                     | 0                       | 0                     | 0                          | 0            | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                     | 0                       | 0                     | 0                          | 0            | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                     | 0                       | 0                     | 0                          | 0            | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                     | 0                       | 0                     | 0                          | 0            | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                     | 0                       | 0                     | 0                          | 0            | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                     | 0                       | 0                     | 0                          | 0            | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                     | 0                       | 0                     | 0                          | 0            | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                     | 0                       | 0                     | 0                          | 0            | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                     | 0                       | 0                     | 0                          | 0            | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                     | 0                       | 0                     | 0                          | 0            | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                     | 0                       | 0                     | 0                          | 0            | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                     | 0                       | 0                     | 0                          | 0            | 23.02 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS |                         |                       |                            |              |        |
|----------------------------------------|-------|----------------------------------------|-----------------------|-------------------------|-----------------------|----------------------------|--------------|--------|
|                                        |       |                                        | INTEREST<br>GENERAL   | INTEREST<br>DIRECT BLDG | INTEREST ATRUM<br>PAV | INTEREST PRO<br>BLDG SOUTH | INTEREST TOB |        |
|                                        |       |                                        | 2.01                  | 2.02                    | 2.03                  | 2.04                       | 2.05         |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                     | 0                       | 0                     | 0                          | 0            | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                     | 0                       | 0                     | 0                          | 0            | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                     | 0                       | 0                     | 0                          | 0            | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                     | 0                       | 0                     | 0                          | 0            | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                     | 0                       | 0                     | 0                          | 0            | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                     | 0                       | 0                     | 0                          | 0            | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                     | 0                       | 0                     | 0                          | 0            | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                     | 0                       | 0                     | 0                          | 0            | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                     | 0                       | 0                     | 0                          | 0            | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                       |                         |                       |                            |              |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                     | 0                       | 0                     | 0                          | 0            | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                     | 0                       | 0                     | 0                          | 0            | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                     | 0                       | 0                     | 0                          | 0            | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                     | 0                       | 0                     | 0                          | 0            | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                     | 0                       | 0                     | 0                          | 0            | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                     | 0                       | 0                     | 0                          | 0            | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                     | 0                       | 0                     | 0                          | 0            | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                     | 0                       | 0                     | 0                          | 0            | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                       |                         |                       |                            |              |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                     | 0                       | 0                     | 0                          | 0            | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                     | 0                       | 0                     | 0                          | 0            | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                     | 0                       | 0                     | 0                          | 0            | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                     | 0                       | 0                     | 0                          | 0            | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                     | 0                       | 0                     | 0                          | 0            | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                     | 0                       | 0                     | 0                          | 0            | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                     | 0                       | 0                     | 0                          | 0            | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                     | 0                       | 0                     | 0                          | 0            | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                     | 0                       | 0                     | 0                          | 0            | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                     | 0                       | 0                     | 0                          | 0            | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                     | 0                       | 0                     | 0                          | 0            | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                     | 0                       | 0                     | 0                          | 0            | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                     | 0                       | 0                     | 0                          | 0            | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                     | 0                       | 0                     | 0                          | 0            | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                     | 0                       | 0                     | 0                          | 0            | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                     | 0                       | 0                     | 0                          | 0            | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                     | 0                       | 0                     | 0                          | 0            | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                     | 0                       | 0                     | 0                          | 0            | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                     | 0                       | 0                     | 0                          | 0            | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                     | 0                       | 0                     | 0                          | 0            | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                     | 0                       | 0                     | 0                          | 0            | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                     | 0                       | 0                     | 0                          | 0            | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                     | 0                       | 0                     | 0                          | 0            | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                     | 0                       | 0                     | 0                          | 0            | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                       |                         |                       |                            |              |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                     | 0                       | 0                     | 0                          | 0            | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                     | 0                       | 0                     | 0                          | 0            | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                     | 0                       | 0                     | 0                          | 0            | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                     | 0                       | 0                     | 0                          | 0            | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                     | 0                       | 0                     | 0                          | 0            | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                       |                         |                       |                            |              |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                     | 0                       | 0                     | 0                          | 0            | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                     | 0                       | 0                     | 0                          | 0            | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                     | 0                       | 0                     | 0                          | 0            | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                       |                         |                       |                            |              |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                     | 0                       | 0                     | 0                          | 0            | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                     | 0                       | 0                     | 0                          | 0            | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                     | 0                       | 0                     | 0                          | 0            | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                     | 0                       | 0                     | 0                          | 0            | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                     | 0                       | 0                     | 0                          | 0            | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                     | 0                       | 0                     | 0                          | 0            | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                     | 0                       | 0                     | 0                          | 0            | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                     | 0                       | 0                     | 0                          | 0            | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                       |                         |                       |                            |              |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                     | 0                       | 0                     | 0                          | 0            | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                     | 0                       | 0                     | 0                          | 0            | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                     | 0                       | 0                     | 0                          | 0            | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                     | 0                       | 0                     | 0                          | 0            | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                     | 0                       | 0                     | 0                          | 0            | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                     | 0                       | 0                     | 0                          | 0            | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                     | 0                       | 0                     | 0                          | 0            | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                     | 0                       | 0                     | 0                          | 0            | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                     | 0                       | 0                     | 0                          | 0            | 194.01 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | CAPITAL RELATED COSTS |                         |                       |                            |              |          |
|-------------------------|-------|-----------------------------------|-----------------------|-------------------------|-----------------------|----------------------------|--------------|----------|
|                         |       |                                   | INTEREST<br>GENERAL   | INTEREST<br>DIRECT BLDG | INTEREST ATRUM<br>PAV | INTEREST PRO<br>BLDG SOUTH | INTEREST TOB |          |
|                         |       |                                   | 2.01                  | 2.02                    | 2.03                  | 2.04                       | 2.05         |          |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                     | 0                       | 0                     | 0                          | 0            | 0 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                     | 0                       | 0                     | 0                          | 0            | 0 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                     | 0                       | 0                     | 0                          | 0            | 0 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                       |                         |                       |                            |              | 200.00   |
| 201.00                  |       | Negative Cost Centers             | 0                     | 0                       | 0                     | 0                          | 0            | 0 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 0                     | 0                       | 0                     | 0                          | 0            | 0 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS |                |                         | EMPLOYEE BENEFITS DEPARTMENT | TRANSITION RECRUITMENT |       |
|------------------------------|-------|--------------------------------------|-----------------------|----------------|-------------------------|------------------------------|------------------------|-------|
|                              |       |                                      | INTEREST PRO BLDG III | INTEREST TOWER | INTEREST PRO BLDG NORTH |                              |                        |       |
|                              |       |                                      | 2.06                  | 2.07           | 2.08                    |                              |                        |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                       |                |                         | 4.00                         | 5.01                   |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                       |                |                         |                              |                        | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                       |                |                         |                              |                        | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                       |                |                         |                              |                        | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                       |                |                         |                              |                        | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                       |                |                         |                              |                        | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                       |                |                         |                              |                        | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                       |                |                         |                              |                        | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                       |                |                         |                              |                        | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                       |                |                         |                              |                        | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                       |                |                         |                              |                        | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                       |                |                         |                              |                        | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                       |                |                         |                              |                        | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                       |                |                         |                              |                        | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                       |                |                         |                              |                        | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                       |                |                         |                              |                        | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                       |                |                         |                              |                        | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                       |                |                         |                              |                        | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                       |                |                         |                              |                        | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                       |                |                         |                              |                        | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                       |                |                         |                              |                        | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                       |                |                         |                              |                        | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                       |                |                         |                              |                        | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                       |                |                         |                              |                        | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                       |                |                         |                              |                        | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                | 0                     |                |                         |                              |                        | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       | 0                     | 0              |                         |                              |                        | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              | 0                     |                | 0                       |                              |                        | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                     | 0              | 0                       | 203,474,639                  |                        | 4.00  |
| 5.01                         | 00500 | TRANSITION RECRUITMENT               | 0                     | 0              | 0                       | 0                            | 86,171                 | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0                     | 0              | 0                       | 0                            | 0                      | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                     | 0              | 0                       | 1,247,385                    | 0                      | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                     | 0              | 0                       | 849,414                      | 0                      | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                     | 0              | 0                       | 781,265                      | 0                      | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                     | 0              | 0                       | 386,324                      | 0                      | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 0                     | 0              | 0                       | 8,298,320                    | 0                      | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                     | 0              | 0                       | 1,234,664                    | 0                      | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                     | 0              | 0                       | 2,913,653                    | 0                      | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                     | 0              | 0                       | 1,591,667                    | 0                      | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 0                     | 0              | 0                       | 16,549,405                   | 0                      | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0                     | 0              | 0                       | 1,842,749                    | 0                      | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                     | 0              | 0                       | 0                            | 0                      | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                     | 0              | 0                       | 180,972                      | 0                      | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0                     | 0              | 0                       | 4,451,225                    | 0                      | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                     | 0              | 0                       | 87,860                       | 0                      | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                     | 0              | 0                       | 1,543,698                    | 0                      | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0                     | 0              | 0                       | 345,906                      | 0                      | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                     | 0              | 0                       | 2,567,132                    | 0                      | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                     | 0              | 0                       | 0                            | 0                      | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                     | 0              | 0                       | 2,835,422                    | 0                      | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                     | 0              | 0                       | 1,161,039                    | 0                      | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                     | 0              | 0                       | 2,760,605                    | 0                      | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                     | 0              | 0                       | 133,881                      | 0                      | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                     | 0              | 0                       | 53,702                       | 0                      | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                     | 0              | 0                       | 437,665                      | 0                      | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                     | 0              | 0                       | 501,034                      | 0                      | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                     | 0              | 0                       | 55,669                       | 0                      | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                     | 0              | 0                       | 21,336                       | 0                      | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                     | 0              | 0                       | 24,047                       | 0                      | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                     | 0              | 0                       | 0                            | 0                      | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                     | 0              | 0                       | 484,533                      | 0                      | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                     | 0              | 0                       | 219,696                      | 0                      | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                     | 0              | 0                       | 379,478                      | 0                      | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                     | 0              | 0                       | 2,199,052                    | 0                      | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                     | 0              | 0                       | 3,428,652                    | 0                      | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                     | 0              | 0                       | 860,712                      | 0                      | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                     | 0              | 0                       | 0                            | 0                      | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                     | 0              | 0                       | 10,313,557                   | 0                      | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                     | 0              | 0                       | 1,515,867                    | 0                      | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                     | 0              | 0                       | 706,925                      | 0                      | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                     | 0              | 0                       | 122,139                      | 0                      | 23.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS    |                |                            | EMPLOYEE<br>BENEFITS<br>DEPARTMENT | TRANSITION<br>RECRUITMENT |        |
|----------------------------------------|-------|----------------------------------------|--------------------------|----------------|----------------------------|------------------------------------|---------------------------|--------|
|                                        |       |                                        | INTEREST PRO<br>BLDG III | INTEREST TOWER | INTEREST PRO<br>BLDG NORTH |                                    |                           |        |
|                                        |       |                                        | 2.06                     | 2.07           | 2.08                       |                                    |                           |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                        | 0              | 0                          | 74,051                             | 0                         | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                        | 0              | 0                          | 275,393                            | 0                         | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                        | 0              | 0                          | 219,477                            | 0                         | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                        | 0              | 0                          | 60,184                             | 0                         | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                        | 0              | 0                          | 126,789                            | 0                         | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                        | 0              | 0                          | 121,203                            | 0                         | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                        | 0              | 0                          | 53,499                             | 0                         | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                        | 0              | 0                          | 148,589                            | 0                         | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                        | 0              | 0                          | 104,465                            | 0                         | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                        | 0              | 0                          | 182,093                            | 0                         | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                          |                |                            |                                    |                           |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                        | 0              | 0                          | 13,021,357                         | 0                         | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                        | 0              | 0                          | 3,410,530                          | 0                         | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                        | 0              | 0                          | 3,861,999                          | 0                         | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                        | 0              | 0                          | 1,152,104                          | 0                         | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                        | 0              | 0                          | 2,509,460                          | 0                         | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                        | 0              | 0                          | 1,029,629                          | 0                         | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                        | 0              | 0                          | 974,303                            | 0                         | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                        | 0              | 0                          | 428,421                            | 0                         | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                          |                |                            |                                    |                           |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                        | 0              | 0                          | 3,615,180                          | 0                         | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                        | 0              | 0                          | 1,143,032                          | 0                         | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                        | 0              | 0                          | 1,160,701                          | 0                         | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                        | 0              | 0                          | 256,579                            | 0                         | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                        | 0              | 0                          | 3,404,045                          | 0                         | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                        | 0              | 0                          | 793,553                            | 0                         | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                        | 0              | 0                          | 181,215                            | 0                         | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                        | 0              | 0                          | 5,780,085                          | 0                         | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                        | 0              | 0                          | 130,856                            | 0                         | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                        | 0              | 0                          | 0                                  | 0                         | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                        | 0              | 0                          | 489,451                            | 0                         | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                        | 0              | 0                          | 0                                  | 0                         | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                        | 0              | 0                          | 1,260,553                          | 0                         | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                        | 0              | 0                          | 1,004,304                          | 0                         | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                        | 0              | 0                          | 769,488                            | 0                         | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                        | 0              | 0                          | 522,993                            | 0                         | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                        | 0              | 0                          | 1,121,474                          | 0                         | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                        | 0              | 0                          | 283,125                            | 0                         | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                        | 0              | 0                          | 0                                  | 0                         | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                        | 0              | 0                          | 0                                  | 0                         | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                        | 0              | 0                          | 0                                  | 0                         | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                        | 0              | 0                          | 0                                  | 0                         | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                        | 0              | 0                          | 0                                  | 0                         | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                        | 0              | 0                          | 617,049                            | 0                         | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                          |                |                            |                                    |                           |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                        | 0              | 0                          | 5,974,365                          | 0                         | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                        | 0              | 0                          | 2,456,233                          | 0                         | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                        | 0              | 0                          | 0                                  | 0                         | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                        | 0              | 0                          | 0                                  | 0                         | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                        | 0              | 0                          | 0                                  | 0                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                          |                |                            |                                    |                           |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                        | 0              | 0                          | 0                                  | 0                         | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                        | 0              | 0                          | 0                                  | 0                         | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                        | 0              | 0                          | 0                                  | 0                         | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                          |                |                            |                                    |                           |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                        | 0              | 0                          | 342,258                            | 0                         | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                        | 0              | 0                          | 0                                  | 0                         | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                        | 0              | 0                          | 171,867                            | 0                         | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                        | 0              | 0                          | 0                                  | 0                         | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                        | 0              | 0                          | 17,241                             | 0                         | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                        | 0              | 0                          | 0                                  | 0                         | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                        | 0              | 0                          | 0                                  | 0                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                        | 0              | 0                          | 132,335,843                        | 0                         | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                          |                |                            |                                    |                           |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                        | 0              | 0                          | 288,815                            | 0                         | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                        | 0              | 0                          | 1,874,570                          | 0                         | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                        | 0              | 0                          | 366,213                            | 0                         | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                        | 0              | 0                          | 5,354,545                          | 0                         | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                        | 0              | 0                          | 4,957,165                          | 0                         | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                        | 0              | 0                          | 652,582                            | 0                         | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                        | 0              | 0                          | 49,516,070                         | 86,171                    | 192.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | CAPITAL RELATED COSTS    |                |                            | EMPLOYEE<br>BENEFITS<br>DEPARTMENT | TRANSITION<br>RECRUITMENT |        |
|-------------------------|-------|-----------------------------------|--------------------------|----------------|----------------------------|------------------------------------|---------------------------|--------|
|                         |       |                                   | INTEREST PRO<br>BLDG III | INTEREST TOWER | INTEREST PRO<br>BLDG NORTH |                                    |                           |        |
|                         |       |                                   | 2.06                     | 2.07           | 2.08                       |                                    |                           |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                   | 0                        | 0              | 0                          | 3,703,954                          | 0                         | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           | 0                        | 0              | 0                          | 1,878,143                          | 0                         | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                        | 0              | 0                          | 205,096                            | 0                         | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                        | 0              | 0                          | 2,315,159                          | 0                         | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                        | 0              | 0                          | 26,484                             | 0                         | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                          |                |                            |                                    |                           | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                        | 0              | 0                          | 0                                  | 0                         | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 0                        | 0              | 0                          | 203,474,639                        | 86,171                    | 202.00 |

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| Cost Center Description      |       | PARKING GARAGE                       | RESEARCH<br>ADMINISTRATION | ADMIN & GEN<br>INPT SERVICE | ADMIN & GEN<br>OUTPT SERVICE | ADMIN & GEN<br>ANIMAL LAB |       |
|------------------------------|-------|--------------------------------------|----------------------------|-----------------------------|------------------------------|---------------------------|-------|
|                              |       | 5.02                                 | 5.03                       | 5.04                        | 5.05                         | 5.06                      |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                            |                             |                              |                           |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                            |                             |                              |                           | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                            |                             |                              |                           | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                            |                             |                              |                           | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                            |                             |                              |                           | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                            |                             |                              |                           | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                            |                             |                              |                           | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                            |                             |                              |                           | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                            |                             |                              |                           | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                            |                             |                              |                           | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                            |                             |                              |                           | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                            |                             |                              |                           | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                            |                             |                              |                           | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                            |                             |                              |                           | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                            |                             |                              |                           | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                            |                             |                              |                           | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                            |                             |                              |                           | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                            |                             |                              |                           | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                            |                             |                              |                           | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                            |                             |                              |                           | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                            |                             |                              |                           | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                            |                             |                              |                           | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                            |                             |                              |                           | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                            |                             |                              |                           | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                            |                             |                              |                           | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                            |                             |                              |                           | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                            |                             |                              |                           | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                            |                             |                              |                           | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                            |                             |                              |                           | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                            |                             |                              |                           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | -1,437,423                 |                             |                              |                           | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                          | 9,714,234                   |                              |                           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                          | 0                           | 6,753,034                    |                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                          | 0                           | 0                            | 4,413,571                 | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                          | 0                           | 0                            | 0                         | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 0                          | 0                           | 0                            | 1,181,311                 | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                          | 0                           | 0                            | 0                         | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                          | 0                           | 0                            | 0                         | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                          | 0                           | 0                            | 0                         | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 0                          | 0                           | 0                            | 0                         | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0                          | 0                           | 0                            | 0                         | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                          | 0                           | 0                            | 0                         | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                          | 0                           | 0                            | 0                         | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0                          | 0                           | 0                            | 0                         | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                          | 0                           | 0                            | 0                         | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                          | 0                           | 0                            | 0                         | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0                          | 0                           | 0                            | 0                         | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                          | 0                           | 0                            | 0                         | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                          | 0                           | 0                            | 0                         | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                          | 0                           | 0                            | 0                         | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                          | 0                           | 0                            | 0                         | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                          | 0                           | 0                            | 0                         | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                          | 0                           | 0                            | 0                         | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                          | 0                           | 0                            | 0                         | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                          | 0                           | 0                            | 0                         | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                          | 0                           | 0                            | 0                         | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                          | 0                           | 0                            | 0                         | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                          | 0                           | 0                            | 0                         | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                          | 0                           | 0                            | 0                         | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                          | 0                           | 0                            | 0                         | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                          | 0                           | 0                            | 0                         | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                          | 0                           | 0                            | 0                         | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                          | 0                           | 0                            | 0                         | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                          | 0                           | 0                            | 0                         | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                          | 0                           | 0                            | 0                         | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                          | 0                           | 0                            | 0                         | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                          | 0                           | 0                            | 0                         | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                          | 0                           | 0                            | 0                         | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                          | 0                           | 0                            | 0                         | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                          | 0                           | 0                            | 0                         | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                          | 0                           | 0                            | 0                         | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                          | 0                           | 0                            | 0                         | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       | 0                          | 0                           | 0                            | 0                         | 23.03 |
| 23.04                        | 02304 | PARAMED OCCUPATIONAL THERAPY         | 0                          | 0                           | 0                            | 0                         | 23.04 |

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| Cost Center Description                |       | PARKING GARAGE                         | RESEARCH<br>ADMINISTRATION | ADMIN & GEN<br>INPT SERVICE | ADMIN & GEN<br>OUTPT SERVICE | ADMIN & GEN<br>ANIMAL LAB |        |
|----------------------------------------|-------|----------------------------------------|----------------------------|-----------------------------|------------------------------|---------------------------|--------|
|                                        |       | 5.02                                   | 5.03                       | 5.04                        | 5.05                         | 5.06                      |        |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                          | 0                           | 0                            | 0                         | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                          | 0                           | 0                            | 0                         | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                          | 0                           | 0                            | 0                         | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                          | 0                           | 0                            | 0                         | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                          | 0                           | 0                            | 0                         | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                          | 0                           | 0                            | 0                         | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                          | 0                           | 0                            | 0                         | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                            |                             |                              |                           |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                          | 0                           | 803,660                      | 31,157                    | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                          | 0                           | 247,623                      | 218                       | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                          | 0                           | 251,301                      | 616                       | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                          | 0                           | 70,059                       | 283                       | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                          | 0                           | 197,832                      | 0                         | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                          | 0                           | 51,456                       | 1                         | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                          | 0                           | 67,471                       | 0                         | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                          | 0                           | 16,577                       | 0                         | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                            |                             |                              |                           |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                          | 0                           | 776,045                      | 335,209                   | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                          | 0                           | 60,893                       | 41,901                    | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                          | 0                           | 73,491                       | 8,262                     | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                          | 0                           | 206,770                      | 94,490                    | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                          | 0                           | 520,073                      | 392,381                   | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                          | 0                           | 16,489                       | 232,153                   | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                          | 0                           | 14,694                       | 52,355                    | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                          | 0                           | 711,754                      | 656,254                   | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                          | 0                           | 1,076                        | 11,739                    | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                          | 0                           |                              |                           | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                          | 0                           | 124,863                      | 28,728                    | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                          | 0                           | 124,044                      | 7,414                     | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                          | 0                           | 145,822                      | 2,478                     | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                          | 0                           | 62,521                       | 24,345                    | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                          | 0                           | 54,481                       | 8,040                     | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                          | 0                           | 24,625                       | 10,599                    | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                          | 0                           | 186,168                      | 130,321                   | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                          | 0                           | 55,680                       | 9,222                     | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                          | 0                           | 258,472                      | 87,673                    | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                          | 0                           | 612,728                      | 152,422                   | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                          | 0                           | 755,921                      | 1,180,650                 | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                          | 0                           | 0                            | 0                         | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                          | 0                           | 43,818                       | 758                       | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                          | 0                           | 2                            | 1,261                     | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                            |                             |                              |                           |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                          | 0                           | 3,716                        | 627,345                   | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                          | 0                           | 158,118                      | 285,296                   | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                          | 0                           | 0                            | 0                         | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                          | 0                           | 0                            | 0                         | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                          | 0                           | 0                            | 0                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                            |                             |                              |                           |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                          | 0                           | 0                            | 0                         | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                          | 0                           | 0                            | 0                         | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                          | 0                           | 0                            | 0                         | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                            |                             |                              |                           |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                          | 0                           | 44,634                       | 0                         | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                          | 0                           | 0                            | 0                         | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                          | 0                           | 8,814                        | 0                         | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                          | 0                           | 0                            | 0                         | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                          | 0                           | 1,343                        | 0                         | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                          | 0                           | 0                            | 0                         | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                          | 0                           | 0                            | 0                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                          | 0                           | 6,753,034                    | 4,413,571                 | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                            |                             |                              |                           |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                          | 0                           | 0                            | 0                         | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                          | 0                           | 0                            | 0                         | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                          | 0                           | 0                            | 0                         | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                          | 3,660,599                   | 0                            | 0                         | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                          | 2,976,776                   | 0                            | 0                         | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                          | 3,076,859                   | 0                            | 0                         | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                          | 0                           | 0                            | 944,162                   | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                          | 0                           | 0                            | 10,363                    | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                          | 0                           | 0                            | 0                         | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 0                          | 0                           | 0                            | 0                         | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 0                          | 0                           | 0                            | 0                         | 194.03 |
| 194.04                                 | 07954 | CON - GNE                              | 0                          | 0                           | 0                            | 0                         | 194.04 |
| 200.00                                 |       | Cross Foot Adjustments                 |                            |                             |                              |                           | 200.00 |

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|-------------------------|-----------------------------------|----------------|----------------------------|-----------------------------|------------------------------|---------------------------|--------|
|                         |                                   | 5.02           | 5.03                       | 5.04                        | 5.05                         | 5.06                      |        |
| 201.00                  | Negative Cost Centers             | -1,437,423     | 0                          | 0                           | 0                            | 0                         | 201.00 |
| 202.00                  | TOTAL (sum lines 118 through 201) | -1,437,423     | 9,714,234                  | 6,753,034                   | 4,413,571                    | 1,181,311                 | 202.00 |

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| Cost Center Description      |       | ADMIN & GEN PT<br>SERVICE            | PERSONNEL<br>DEPARTMENT | RESEARCH<br>FACULTY | RESEARCH SPA | Subtotal   |             |
|------------------------------|-------|--------------------------------------|-------------------------|---------------------|--------------|------------|-------------|
|                              |       | 5.07                                 | 5.08                    | 5.09                | 5.10         | 5A.10      |             |
| GENERAL SERVICE COST CENTERS |       |                                      |                         |                     |              |            |             |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                         |                     |              |            | 1.00        |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                         |                     |              |            | 1.01        |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                         |                     |              |            | 1.02        |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                         |                     |              |            | 1.03        |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                         |                     |              |            | 1.04        |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                         |                     |              |            | 1.05        |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                         |                     |              |            | 1.06        |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                         |                     |              |            | 1.07        |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                         |                     |              |            | 1.08        |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                         |                     |              |            | 1.09        |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                         |                     |              |            | 1.10        |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                         |                     |              |            | 1.11        |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                         |                     |              |            | 1.12        |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                         |                     |              |            | 1.13        |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                         |                     |              |            | 1.14        |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                         |                     |              |            | 1.15        |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                         |                     |              |            | 1.16        |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                         |                     |              |            | 1.17        |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                         |                     |              |            | 2.00        |
| 2.01                         | 00201 | INTEREST GENERAL                     |                         |                     |              |            | 2.01        |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                         |                     |              |            | 2.02        |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                         |                     |              |            | 2.03        |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                         |                     |              |            | 2.04        |
| 2.05                         | 00205 | INTEREST TOB                         |                         |                     |              |            | 2.05        |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                         |                     |              |            | 2.06        |
| 2.07                         | 00207 | INTEREST TOWER                       |                         |                     |              |            | 2.07        |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                         |                     |              |            | 2.08        |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                         |                     |              |            | 4.00        |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                         |                     |              |            | 5.01        |
| 5.02                         | 00540 | PARKING GARAGE                       |                         |                     |              |            | 5.02        |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                         |                     |              |            | 5.03        |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                         |                     |              |            | 5.04        |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                         |                     |              |            | 5.05        |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                         |                     |              |            | 5.06        |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 90,717,800              |                     |              |            | 5.07        |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                       | 10,059,245          |              |            | 5.08        |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                       | 0                   | 17,729,021   |            | 5.09        |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                       | 0                   | 0            | 10,209,220 | 5.10        |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 0                       | 0                   | 0            | 0          | 147,578,234 |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0                       | 168,034             | 0            | 0          | 82,415,130  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                       | 0                   | 0            | 0          | 0           |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                       | 21,289              | 0            | 0          | 4,209,562   |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0                       | 514,051             | 0            | 0          | 28,586,695  |
| 10.00                        | 01000 | DIETARY                              | 0                       | 9,307               | 0            | 0          | 566,847     |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                       | 177,842             | 0            | 0          | 11,289,607  |
| 11.00                        | 01100 | CAFETERIA                            | 0                       | 43,683              | 0            | 0          | 1,437,614   |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                       | 127,822             | 0            | 0          | 18,203,502  |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                       | 0                   | 0            | 0          | 1,409,601   |
| 15.00                        | 01500 | PHARMACY                             | 0                       | 170,335             | 0            | 0          | 21,344,897  |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                       | 85,913              | 0            | 0          | 9,487,487   |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                       | 173,536             | 0            | 0          | 17,105,469  |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                       | 2,455               | 0            | 0          | 515,754     |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               | 0                       | 1,363               | 0            | 0          | 153,319     |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                       | 14,951              | 0            | 0          | 2,030,736   |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                       | 23,718              | 0            | 0          | 2,919,004   |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                       | 3,124               | 0            | 0          | 114,634     |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                       | 1,864               | 0            | 0          | 1,198,214   |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                       | 1,080               | 0            | 0          | 1,640,830   |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                       | 0                   | 0            | 0          | 0           |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                       | 15,787              | 0            | 0          | 1,839,314   |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                       | 13,331              | 0            | 0          | 2,675,370   |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                       | 39,942              | 0            | 0          | -600,861    |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                       | 139,495             | 0            | 0          | 17,362,976  |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                       | 172,379             | 0            | 0          | 20,651,304  |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                       | 24,078              | 0            | 0          | 884,790     |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                       | 0                   | 0            | 0          | -21,844,736 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                       | 953,117             | 0            | 0          | 57,652,897  |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                       | 56,834              | 0            | 0          | 9,666,028   |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                       | 28,976              | 0            | 0          | 433,596     |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                       | 4,718               | 0            | 0          | -321,533    |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                       | 4,088               | 0            | 0          | -498,064    |
| 23.03                        | 02303 | PARAMED SPEECH                       | 0                       | 14,141              | 0            | 0          | -1,763,360  |
| 23.04                        | 02304 | PARAMED OCCUPATIONAL THERAPY         | 0                       | 12,675              | 0            | 0          | -1,100,428  |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | ADMIN & GEN PT<br>SERVICE | PERSONNEL<br>DEPARTMENT | RESEARCH<br>FACULTY | RESEARCH SPA | Subtotal      |        |
|----------------------------------------|-------|----------------------------------------|---------------------------|-------------------------|---------------------|--------------|---------------|--------|
|                                        |       |                                        | 5.07                      | 5.08                    | 5.09                | 5.10         | 5A.10         |        |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                         | 4,461                   | 0                   | 0            | 326,664       | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                         | 12,097                  | 0                   | 0            | 761,732       | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                         | 7,212                   | 0                   | 0            | -787,479      | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                         | 2,520                   | 0                   | 0            | -251,586      | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                         | 13,370                  | 0                   | 0            | 805,761       | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                         | 5,104                   | 0                   | 0            | 129,024       | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                         | 9,282                   | 0                   | 0            | -1,272,992    | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                           |                         |                     |              |               |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 6,046,838                 | 924,745                 | 0                   | 0            | 94,591,410    | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 1,770,890                 | 234,831                 | 0                   | 0            | 24,381,108    | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 1,800,987                 | 240,230                 | 0                   | 0            | 27,047,926    | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 503,157                   | 79,151                  | 0                   | 0            | 8,093,593     | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 1,413,131                 | 165,784                 | 0                   | 0            | 17,781,852    | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 367,563                   | 79,254                  | 0                   | 0            | 6,923,332     | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 481,948                   | 68,777                  | 0                   | 0            | 6,588,009     | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 118,410                   | 26,482                  | 0                   | 0            | 4,463,214     | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                           |                         |                     |              |               |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 8,768,930                 | 280,956                 | 0                   | 0            | 42,538,859    | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 838,167                   | 73,508                  | 0                   | 0            | 8,751,594     | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 604,453                   | 73,456                  | 0                   | 0            | 8,710,733     | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 2,386,213                 | 22,934                  | 0                   | 0            | 8,175,325     | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 7,490,654                 | 217,746                 | 0                   | 0            | 34,158,976    | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 2,351,696                 | 44,788                  | 0                   | 0            | 12,866,795    | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 608,749                   | 9,860                   | 0                   | 0            | 4,719,098     | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 11,398,984                | 416,941                 | 0                   | 0            | 74,918,914    | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 120,652                   | 7,610                   | 0                   | 0            | 1,933,912     | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    |                           |                         |                     |              | 0             | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 1,168,341                 | 33,784                  | 0                   | 0            | 12,353,883    | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 957,401                   | 0                       | 0                   | 0            | 1,090,202     | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 1,065,467                 | 89,963                  | 0                   | 0            | 12,158,874    | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 680,855                   | 67,838                  | 0                   | 0            | 6,705,069     | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 466,534                   | 49,943                  | 0                   | 0            | 5,013,883     | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 277,886                   | 32,537                  | 0                   | 0            | 3,604,952     | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 2,583,838                 | 76,670                  | 0                   | 0            | 9,963,935     | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 486,466                   | 25,107                  | 0                   | 0            | 2,311,692     | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 2,689,924                 | 0                       | 0                   | 0            | 38,141,676    | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 5,843,460                 | 0                       | 0                   | 0            | 83,283,230    | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 16,764,424                | 0                       | 0                   | 0            | 166,204,079   | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                         | 0                       | 0                   | 0            | 0             | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 320,287                   | 0                       | 0                   | 0            | 3,732,642     | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 12,147                    | 48,979                  | 0                   | 0            | 3,928,492     | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                           |                         |                     |              |               |        |
| 90.00                                  | 09000 | CLINIC                                 | 6,063,239                 | 550,509                 | 0                   | 0            | 81,182,307    | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 3,874,742                 | 173,343                 | 0                   | 0            | 21,359,812    | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   |                           |                         |                     |              | 0             | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                         | 0                       | 0                   | 0            | 0             | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                         | 0                       | 0                   | 0            | 0             | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                           |                         |                     |              |               |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                         | 0                       | 0                   | 0            | 0             | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                         | 0                       | 0                   | 0            | 0             | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                         | 0                       | 0                   | 0            | 0             | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                           |                         |                     |              |               |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 318,821                   | 21,957                  | 0                   | 0            | 6,711,512     | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                         | 0                       | 0                   | 0            | 0             | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 62,956                    | 8,729                   | 0                   | 0            | 2,174,924     | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                         | 0                       | 0                   | 0            | 0             | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 9,590                     | 578                     | 0                   | 0            | 308,973       | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                         | 0                       | 0                   | 0            | 0             | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               |                           |                         |                     |              |               | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 90,717,800                | 7,220,964               | 0                   | 0            | 1,283,830,340 | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                           |                         |                     |              |               |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                         | 14,655                  | 0                   | 0            | 4,625,276     | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                         | 86,029                  | 0                   | 0            | 11,539,334    | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                         | 26,354                  | 0                   | 0            | 2,479,941     | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                         | 365,776                 | 0                   | 5,630,508    | 62,688,316    | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                         | 359,297                 | 0                   | 4,578,712    | 46,403,180    | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                         | 24,682                  | 17,729,021          | 0            | 28,183,779    | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                         | 1,579,463               | 0                   | 0            | 309,063,211   | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                         | 143,068                 | 0                   | 0            | 27,857,503    | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                         | 119,376                 | 0                   | 0            | 58,135,274    | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 0                         | 31,213                  | 0                   | 0            | 2,755,941     | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 0                         | 86,247                  | 0                   | 0            | 37,595,877    | 194.03 |
| 194.04                                 | 07954 | CON - GNE                              | 0                         | 2,121                   | 0                   | 0            | 215,736       | 194.04 |
| 200.00                                 |       | Cross Foot Adjustments                 |                           |                         |                     |              | 0             | 200.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                                   | ADMIN & GEN PT<br>SERVICE | PERSONNEL<br>DEPARTMENT | RESEARCH<br>FACULTY | RESEARCH SPA | Subtotal      |        |
|-------------------------|-----------------------------------|---------------------------|-------------------------|---------------------|--------------|---------------|--------|
|                         |                                   | 5.07                      | 5.08                    | 5.09                | 5.10         | 5A.10         |        |
| 201.00                  | Negative Cost Centers             | 0                         | 0                       | 0                   | 0            | -1,437,423    | 201.00 |
| 202.00                  | TOTAL (sum lines 118 through 201) | 90,717,800                | 10,059,245              | 17,729,021          | 10,209,220   | 1,873,936,285 | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | CORPORATE<br>ADMINISTRATION          | MAINTENANCE &<br>REPAIRS | RENTED SPACE<br>COSTS | LAUNDRY &<br>LINEN SERVICE | HOUSEKEEPING |       |
|------------------------------|-------|--------------------------------------|--------------------------|-----------------------|----------------------------|--------------|-------|
|                              |       | 5.11                                 | 6.00                     | 6.01                  | 8.00                       | 9.00         |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                          |                       |                            |              |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                          |                       |                            |              | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                          |                       |                            |              | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                          |                       |                            |              | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                          |                       |                            |              | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                          |                       |                            |              | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                          |                       |                            |              | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                          |                       |                            |              | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                          |                       |                            |              | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                          |                       |                            |              | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                          |                       |                            |              | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                          |                       |                            |              | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                          |                       |                            |              | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                          |                       |                            |              | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                          |                       |                            |              | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                          |                       |                            |              | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                          |                       |                            |              | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                          |                       |                            |              | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                          |                       |                            |              | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                          |                       |                            |              | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                          |                       |                            |              | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                          |                       |                            |              | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                          |                       |                            |              | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                          |                       |                            |              | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                          |                       |                            |              | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                          |                       |                            |              | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                          |                       |                            |              | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                          |                       |                            |              | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                          |                       |                            |              | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                          |                       |                            |              | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                          |                       |                            |              | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                          |                       |                            |              | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                          |                       |                            |              | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                          |                       |                            |              | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                          |                       |                            |              | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                          |                       |                            |              | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                          |                       |                            |              | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                          |                       |                            |              | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                          |                       |                            |              | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 147,578,234              |                       |                            |              | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 6,925,426                | 89,340,556            |                            |              | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                        | 0                     | 0                          |              | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 353,734                  | 376,237               | 0                          | 4,939,533    | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 2,402,169                | 2,256,733             | 0                          | 0            | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 47,633                   | 203,059               | 0                          | 0            | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 948,677                  | 1,105,064             | 0                          | 0            | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 120,804                  | 1,619,998             | 0                          | 0            | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 1,529,658                | 609,692               | 0                          | 0            | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 118,450                  | 1,479,237             | 0                          | 0            | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 1,793,633                | 730,633               | 0                          | 0            | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 797,243                  | 526,585               | 0                          | 0            | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 1,437,390                | 458,612               | 0                          | 0            | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 43,339                   | 0                     | 0                          | 0            | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               | 12,884                   | 16,252                | 0                          | 0            | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 170,645                  | 266,947               | 0                          | 0            | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 245,287                  | 188,269               | 0                          | 0            | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 9,633                    | 0                     | 0                          | 0            | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 100,687                  | 579,209               | 0                          | 0            | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 137,881                  | 0                     | 0                          | 0            | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                        | 0                     | 0                          | 0            | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 154,559                  | 21,540                | 0                          | 0            | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 224,814                  | 44,885                | 0                          | 0            | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                        | 158,904               | 0                          | 0            | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 1,459,028                | 4,475,158             | 0                          | 0            | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 1,735,350                | 777,410               | 0                          | 0            | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 74,350                   | 0                     | 0                          | 0            | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                        | 0                     | 0                          | 0            | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 4,844,631                | 860,301               | 0                          | 0            | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 812,246                  | 536,431               | 0                          | 0            | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 36,436                   | 243,946               | 0                          | 0            | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                        | 12,726                | 0                          | 0            | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                        | 41,962                | 0                          | 0            | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       | 0                        | 171,888               | 0                          | 0            | 23.03 |
| 23.04                        | 02304 | PARAMED OCCUPATIONAL THERAPY         | 0                        | 86,847                | 0                          | 0            | 23.04 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CORPORATE<br>ADMINISTRATION | MAINTENANCE &<br>REPAIRS | RENTED SPACE<br>COSTS | LAUNDRY &<br>LINEN SERVICE | HOUSEKEEPING |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------|--------------------------|-----------------------|----------------------------|--------------|--------|
|                                        |       |                                        | 5.11                        | 6.00                     | 6.01                  | 8.00                       | 9.00         |        |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 27,450                      | 23,431                   | 0                     | 0                          | 8,984        | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 64,009                      | 112,299                  | 0                     | 0                          | 43,058       | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                           | 39,210                   | 0                     | 0                          | 15,034       | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                           | 7,911                    | 0                     | 0                          | 3,033        | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 67,709                      | 6,965                    | 0                     | 0                          | 2,671        | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 10,842                      | 42,951                   | 0                     | 0                          | 16,468       | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                           | 32,245                   | 0                     | 0                          | 12,364       | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                             |                          |                       |                            |              |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 7,948,611                   | 10,526,675               | 0                     | 1,179,591                  | 4,036,159    | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 2,048,769                   | 1,849,755                | 0                     | 112,192                    | 709,237      | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 2,272,864                   | 1,960,851                | 0                     | 215,472                    | 751,833      | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 680,113                     | 556,638                  | 0                     | 0                          | 213,427      | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 1,494,227                   | 1,582,593                | 0                     | 57,704                     | 606,801      | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 581,775                     | 1,134,514                | 0                     | 148,090                    | 434,998      | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 553,597                     | 1,046,507                | 0                     | 254,171                    | 401,254      | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 375,048                     | 631,877                  | 0                     | 146,484                    | 242,275      | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                             |                          |                       |                            |              |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 3,574,583                   | 5,088,805                | 0                     | 442,849                    | 1,951,160    | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 735,405                     | 1,305,371                | 0                     | 0                          | 500,508      | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 731,972                     | 917,827                  | 0                     | 0                          | 351,915      | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 686,981                     | 693,615                  | 0                     | 0                          | 265,947      | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 2,870,413                   | 3,486,177                | 0                     | 642,175                    | 1,336,677    | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 1,081,210                   | 990,443                  | 0                     | 0                          | 379,758      | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 396,551                     | 258,477                  | 0                     | 150,246                    | 99,106       | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 6,295,511                   | 4,044,706                | 0                     | 192,843                    | 1,550,829    | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 162,509                     | 61,954                   | 0                     | 0                          | 23,754       | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    |                             |                          |                       |                            |              | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 1,038,109                   | 215,871                  | 0                     | 0                          | 82,770       | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 91,611                      | 0                        | 0                     | 0                          | 0            | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 1,021,722                   | 288,401                  | 0                     | 0                          | 110,579      | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 563,434                     | 536,861                  | 0                     | 57,492                     | 205,844      | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 421,322                     | 482,345                  | 0                     | 21,059                     | 184,942      | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 302,928                     | 323,871                  | 0                     | 0                          | 124,179      | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 837,279                     | 639,400                  | 0                     | 0                          | 245,160      | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 194,254                     | 105,549                  | 0                     | 0                          | 40,470       | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 3,205,083                   | 0                        | 0                     | 0                          | 0            | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 6,998,373                   | 0                        | 0                     | 0                          | 0            | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 13,966,295                  | 0                        | 0                     | 0                          | 0            | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                           | 0                        | 0                     | 0                          | 0            | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 313,658                     | 89,427                   | 0                     | 0                          | 34,288       | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 330,115                     | 276,664                  | 0                     | 0                          | 106,079      | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                             |                          |                       |                            |              |        |
| 90.00                                  | 09000 | CLINIC                                 | 6,821,830                   | 5,705,419                | 0                     | 0                          | 2,187,583    | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 1,794,886                   | 2,185,449                | 0                     | 1,203,666                  | 837,949      | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                           | 0                        | 0                     | 0                          | 0            | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                           | 0                        | 0                     | 0                          | 0            | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                           | 0                        | 0                     | 0                          | 0            | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                             |                          |                       |                            |              |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                           | 0                        | 0                     | 0                          | 0            | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                           | 0                        | 0                     | 0                          | 0            | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                           | 0                        | 0                     | 0                          | 0            | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                             |                          |                       |                            |              |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 563,975                     | 70,466                   | 0                     | 0                          | 27,018       | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                           | 0                        | 0                     | 0                          | 0            | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 182,761                     | 21,755                   | 0                     | 0                          | 8,341        | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                           | 0                        | 0                     | 0                          | 0            | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 25,963                      | 172                      | 0                     | 0                          | 66           | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                           | 0                        | 0                     | 0                          | 0            | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               |                             |                          |                       |                            |              | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 97,870,334                  | 65,191,972               | 0                     | 4,824,034                  | 23,986,494   | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                             |                          |                       |                            |              |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 388,667                     | 1,610,410                | 0                     | 115,499                    | 617,467      | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 969,662                     | 0                        | 0                     | 0                          | 0            | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 208,392                     | 0                        | 0                     | 0                          | 0            | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 5,267,762                   | 6,496,802                | 0                     | 0                          | 2,491,017    | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 3,899,306                   | 438,577                  | 0                     | 0                          | 168,160      | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 2,368,311                   | 1,043,411                | 0                     | 0                          | 400,067      | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 25,970,809                  | 12,022,118               | 0                     | 0                          | 4,609,548    | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 2,340,894                   | 1,065,123                | 0                     | 0                          | 408,392      | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 4,885,165                   | 323,226                  | 0                     | 0                          | 123,932      | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 231,584                     | 1,148,917                | 0                     | 0                          | 440,520      | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 3,159,219                   | 0                        | 0                     | 0                          | 0            | 194.03 |
| 194.04                                 | 07954 | CON - GNE                              | 18,129                      | 0                        | 0                     | 0                          | 0            | 194.04 |
| 200.00                                 |       | Cross Foot Adjustments                 |                             |                          |                       |                            |              | 200.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |  |                                   | CORPORATE<br>ADMINISTRATION | MAINTENANCE &<br>REPAIRS | RENTED SPACE<br>COSTS | LAUNDRY &<br>LINEN SERVICE | HOUSEKEEPING |        |
|-------------------------|--|-----------------------------------|-----------------------------|--------------------------|-----------------------|----------------------------|--------------|--------|
|                         |  |                                   | 5.11                        | 6.00                     | 6.01                  | 8.00                       | 9.00         |        |
| 201.00                  |  | Negative Cost Centers             | 0                           | 0                        | 0                     | 0                          | 0            | 201.00 |
| 202.00                  |  | TOTAL (sum lines 118 through 201) | 147,578,234                 | 89,340,556               | 0                     | 4,939,533                  | 33,245,597   | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | DIETARY | PATIENT FOOD SERVICE | CAFETERIA | NURSING ADMINISTRATION | CENTRAL SERVICES & SUPPLY |       |
|------------------------------|-------|--------------------------------------|---------|----------------------|-----------|------------------------|---------------------------|-------|
|                              |       |                                      | 10.00   | 10.01                | 11.00     | 13.00                  | 14.00                     |       |
| GENERAL SERVICE COST CENTERS |       |                                      |         |                      |           |                        |                           |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |         |                      |           |                        |                           | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |         |                      |           |                        |                           | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |         |                      |           |                        |                           | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |         |                      |           |                        |                           | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |         |                      |           |                        |                           | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |         |                      |           |                        |                           | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |         |                      |           |                        |                           | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |         |                      |           |                        |                           | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |         |                      |           |                        |                           | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |         |                      |           |                        |                           | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |         |                      |           |                        |                           | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |         |                      |           |                        |                           | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |         |                      |           |                        |                           | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |         |                      |           |                        |                           | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |         |                      |           |                        |                           | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |         |                      |           |                        |                           | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |         |                      |           |                        |                           | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |         |                      |           |                        |                           | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |         |                      |           |                        |                           | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |         |                      |           |                        |                           | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |         |                      |           |                        |                           | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |         |                      |           |                        |                           | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |         |                      |           |                        |                           | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |         |                      |           |                        |                           | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |         |                      |           |                        |                           | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |         |                      |           |                        |                           | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |         |                      |           |                        |                           | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |         |                      |           |                        |                           | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |         |                      |           |                        |                           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |         |                      |           |                        |                           | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |         |                      |           |                        |                           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |         |                      |           |                        |                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |         |                      |           |                        |                           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |         |                      |           |                        |                           | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |         |                      |           |                        |                           | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |         |                      |           |                        |                           | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |         |                      |           |                        |                           | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |         |                      |           |                        |                           | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |         |                      |           |                        |                           | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |         |                      |           |                        |                           | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |         |                      |           |                        |                           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |         |                      |           |                        |                           | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |         |                      |           |                        |                           | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 895,396 |                      |           |                        |                           | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 716,944 | 14,483,998           |           |                        |                           | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 178,452 | 0                    | 3,978,011 |                        |                           | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0       | 0                    | 58,142    | 20,634,763             |                           | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0       | 0                    | 0         | 0                      | 3,574,460                 | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0       | 0                    | 77,480    | 0                      | 6,957                     | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0       | 0                    | 39,079    | 0                      | 0                         | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0       | 0                    | 78,936    | 0                      | 5                         | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0       | 0                    | 1,117     | 0                      | 0                         | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0       | 0                    | 620       | 0                      | 27                        | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0       | 0                    | 6,801     | 0                      | 0                         | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0       | 0                    | 10,789    | 0                      | 107                       | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0       | 0                    | 1,421     | 0                      | 0                         | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0       | 0                    | 848       | 0                      | 3                         | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0       | 0                    | 491       | 0                      | 0                         | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0       | 0                    | 0         | 0                      | 0                         | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0       | 0                    | 7,181     | 0                      | 0                         | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0       | 0                    | 6,064     | 0                      | 2                         | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0       | 0                    | 18,168    | 0                      | 0                         | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0       | 0                    | 63,452    | 0                      | 1,122                     | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0       | 0                    | 78,410    | 0                      | 335                       | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0       | 0                    | 10,952    | 230,230                | 0                         | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0       | 0                    | 0         | 0                      | 0                         | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0       | 0                    | 433,544   | 0                      | 941                       | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0       | 0                    | 25,852    | 0                      | 591                       | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0       | 0                    | 13,180    | 0                      | 0                         | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0       | 0                    | 2,146     | 0                      | 778                       | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0       | 0                    | 1,860     | 0                      | 0                         | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       | 0       | 0                    | 6,432     | 0                      | 0                         | 23.03 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | DIETARY | PATIENT FOOD SERVICE | CAFETERIA | NURSING ADMINISTRATION | CENTRAL SERVICES & SUPPLY |        |
|----------------------------------------|-------|----------------------------------------|---------|----------------------|-----------|------------------------|---------------------------|--------|
|                                        |       |                                        | 10.00   | 10.01                | 11.00     | 13.00                  | 14.00                     |        |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0       | 0                    | 5,766     | 0                      | 38                        | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0       | 0                    | 2,029     | 42,653                 | 0                         | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0       | 0                    | 5,503     | 0                      | 0                         | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0       | 0                    | 3,280     | 0                      | 0                         | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0       | 0                    | 1,146     | 0                      | 0                         | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0       | 0                    | 6,081     | 127,837                | 0                         | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0       | 0                    | 2,321     | 0                      | 7                         | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0       | 0                    | 4,222     | 0                      | 1,048                     | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |         |                      |           |                        |                           |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0       | 10,438,220           | 420,639   | 6,434,019              | 234,065                   | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0       | 1,065,964            | 106,817   | 1,936,979              | 88,025                    | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0       | 1,121,946            | 109,273   | 1,881,173              | 78,567                    | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0       | 292,762              | 36,003    | 651,970                | 32,090                    | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0       | 0                    | 75,410    | 1,462,015              | 37,459                    | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0       | 675,635              | 36,050    | 435,015                | 746                       | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0       | 889,471              | 31,284    | 423,338                | 7,644                     | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0       | 0                    | 12,046    | 253,216                | 0                         | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |         |                      |           |                        |                           |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0       | 0                    | 127,799   | 1,676,634              | 1,338,435                 | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0       | 0                    | 33,436    | 606,243                | 10,739                    | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0       | 0                    | 33,413    | 540,358                | 25,896                    | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0       | 0                    | 10,432    | 0                      | 97,108                    | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0       | 0                    | 99,046    | 201,221                | 173,932                   | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0       | 0                    | 20,373    | 0                      | 7,244                     | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0       | 0                    | 4,485     | 0                      | 1,583                     | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0       | 0                    | 189,654   | 518,724                | 127,212                   | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0       | 0                    | 3,462     | 0                      | 0                         | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0       | 0                    | 0         | 0                      | 0                         | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0       | 0                    | 15,367    | 44,989                 | 8,845                     | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0       | 0                    | 0         | 0                      | 80                        | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0       | 0                    | 40,921    | 0                      | 58,714                    | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0       | 0                    | 30,858    | 0                      | 4,205                     | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0       | 0                    | 22,718    | 0                      | 3,344                     | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0       | 0                    | 14,800    | 0                      | 9,254                     | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0       | 0                    | 34,875    | 294,271                | 297,097                   | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0       | 0                    | 11,420    | 0                      | 4,865                     | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0       | 0                    | 0         | 0                      | 15,332                    | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0       | 0                    | 0         | 0                      | 0                         | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0       | 0                    | 0         | 0                      | 0                         | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0       | 0                    | 0         | 0                      | 0                         | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0       | 0                    | 0         | 0                      | 3,750                     | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0       | 0                    | 22,279    | 12,415                 | 775                       | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |         |                      |           |                        |                           |        |
| 90.00                                  | 09000 | CLINIC                                 | 0       | 0                    | 231,879   | 1,576,454              | 94,694                    | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0       | 0                    | 78,849    | 1,195,523              | 46,485                    | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0       | 0                    | 0         | 0                      | 0                         | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0       | 0                    | 0         | 0                      | 0                         | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0       | 0                    | 0         | 0                      | 0                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |         |                      |           |                        |                           |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0       | 0                    | 0         | 0                      | 0                         | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0       | 0                    | 0         | 0                      | 0                         | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0       | 0                    | 0         | 0                      | 0                         | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |         |                      |           |                        |                           |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0       | 0                    | 9,988     | 64,410                 | 0                         | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0       | 0                    | 0         | 0                      | 0                         | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0       | 0                    | 3,970     | 24,461                 | 0                         | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0       | 0                    | 0         | 0                      | 0                         | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0       | 0                    | 263       | 615                    | 0                         | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0       | 0                    | 0         | 0                      | 0                         | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0       | 0                    | 0         | 0                      | 0                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 895,396 | 14,483,998           | 2,841,122 | 20,634,763             | 2,820,146                 | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |         |                      |           |                        |                           |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0       | 0                    | 6,666     | 0                      | 0                         | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0       | 0                    | 39,132    | 0                      | 3                         | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0       | 0                    | 11,988    | 0                      | 42                        | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0       | 0                    | 166,381   | 0                      | 0                         | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0       | 0                    | 163,434   | 0                      | 0                         | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0       | 0                    | 11,227    | 0                      | 7,046                     | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0       | 0                    | 589,088   | 0                      | 131,248                   | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0       | 0                    | 65,078    | 0                      | 1                         | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0       | 0                    | 29,501    | 0                      | 12,514                    | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 0       | 0                    | 14,198    | 0                      | 0                         | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 0       | 0                    | 39,231    | 0                      | 603,460                   | 194.03 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | DIETARY | PATIENT FOOD<br>SERVICE | CAFETERIA | NURSING<br>ADMINISTRATION | CENTRAL<br>SERVICES &<br>SUPPLY |        |
|-------------------------|-------|-----------------------------------|---------|-------------------------|-----------|---------------------------|---------------------------------|--------|
|                         |       |                                   | 10.00   | 10.01                   | 11.00     | 13.00                     | 14.00                           |        |
| 194.04                  | 07954 | CON - GNE                         | 0       | 0                       | 965       | 0                         | 0                               | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |         |                         |           |                           |                                 | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0       | 0                       | 0         | 0                         | 0                               | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 895,396 | 14,483,998              | 3,978,011 | 20,634,763                | 3,574,460                       | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

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11/24/2019 4:22 pm

| Cost Center Description      |       | PHARMACY                             | MEDICAL<br>RECORDS &<br>LIBRARY | MEDICAL<br>RECORDS &<br>LIBRARY | OTHER GENERAL SERVICE     |                           |       |
|------------------------------|-------|--------------------------------------|---------------------------------|---------------------------------|---------------------------|---------------------------|-------|
|                              |       |                                      |                                 |                                 | CLINICAL LAB<br>ADMIN MED | CLINICAL LAB<br>ADMIN PED |       |
|                              |       | 15.00                                | 16.00                           | 16.01                           | 18.00                     | 18.01                     |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                 |                                 |                           |                           |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                 |                                 |                           |                           | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                 |                                 |                           |                           | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                 |                                 |                           |                           | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                 |                                 |                           |                           | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                 |                                 |                           |                           | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                 |                                 |                           |                           | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                 |                                 |                           |                           | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                 |                                 |                           |                           | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                 |                                 |                           |                           | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                 |                                 |                           |                           | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                                 |                                 |                           |                           | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                                 |                                 |                           |                           | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                                 |                                 |                           |                           | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                                 |                                 |                           |                           | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                                 |                                 |                           |                           | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                                 |                                 |                           |                           | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                                 |                                 |                           |                           | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                                 |                                 |                           |                           | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                 |                                 |                           |                           | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                 |                                 |                           |                           | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                                 |                                 |                           |                           | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                                 |                                 |                           |                           | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                                 |                                 |                           |                           | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                                 |                                 |                           |                           | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                                 |                                 |                           |                           | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                                 |                                 |                           |                           | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                                 |                                 |                           |                           | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                                 |                                 |                           |                           | 4.00  |
| 5.01                         | 00500 | TRANSITION RECRUITMENT               |                                 |                                 |                           |                           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                                 |                                 |                           |                           | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                                 |                                 |                           |                           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                                 |                                 |                           |                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                                 |                                 |                           |                           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                                 |                                 |                           |                           | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                                 |                                 |                           |                           | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                                 |                                 |                           |                           | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                                 |                                 |                           |                           | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                                 |                                 |                           |                           | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                                 |                                 |                           |                           | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                                 |                                 |                           |                           | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                                 |                                 |                           |                           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                                 |                                 |                           |                           | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                                 |                                 |                           |                           | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                                 |                                 |                           |                           | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                                 |                                 |                           |                           | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                                 |                                 |                           |                           | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                                 |                                 |                           |                           | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                                 |                                 |                           |                           | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 24,233,741                      |                                 |                           |                           | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                               | 11,052,298                      |                           |                           | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 30                              | 6,100,868                       | 25,357,152                |                           | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                               | 0                               | 0                         | 560,210                   | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               | 0                               | 0                               | 0                         | 0                         | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                               | 0                               | 0                         | 0                         | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                               | 0                               | 0                         | 0                         | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                               | 0                               | 0                         | 0                         | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                               | 0                               | 0                         | 0                         | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                               | 0                               | 0                         | 0                         | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                               | 0                               | 0                         | 0                         | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                               | 0                               | 0                         | 0                         | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                               | 0                               | 0                         | 0                         | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                               | 0                               | 0                         | 0                         | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 2,571                           | 0                               | 0                         | 0                         | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 4                               | 0                               | 0                         | 0                         | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                               | 0                               | 0                         | 0                         | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                               | 0                               | 0                         | 0                         | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                               | 0                               | 0                         | 0                         | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 18                              | 0                               | 0                         | 0                         | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                               | 0                               | 0                         | 0                         | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                               | 0                               | 0                         | 0                         | 23.01 |

## COST ALLOCATION - GENERAL SERVICE COSTS

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11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PHARMACY   | MEDICAL<br>RECORDS &<br>LIBRARY | MEDICAL<br>RECORDS &<br>LIBRARY | OTHER GENERAL SERVICE     |                           |        |
|----------------------------------------|-------|----------------------------------------|------------|---------------------------------|---------------------------------|---------------------------|---------------------------|--------|
|                                        |       |                                        |            |                                 |                                 | CLINICAL LAB<br>ADMIN MED | CLINICAL LAB<br>ADMIN PED |        |
|                                        |       |                                        | 15.00      | 16.00                           | 16.01                           | 18.00                     | 18.01                     |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0          | 0                               | 0                               | 0                         | 0                         | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0          | 0                               | 0                               | 0                         | 0                         | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0          | 0                               | 0                               | 0                         | 0                         | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0          | 0                               | 0                               | 0                         | 0                         | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0          | 0                               | 0                               | 0                         | 0                         | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0          | 0                               | 0                               | 0                         | 0                         | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0          | 0                               | 0                               | 0                         | 0                         | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0          | 0                               | 0                               | 0                         | 0                         | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0          | 0                               | 0                               | 0                         | 0                         | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0          | 0                               | 0                               | 0                         | 0                         | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |            |                                 |                                 |                           |                           |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 829        | 0                               | 3,021,111                       | 0                         | 69,588                    | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 5          | 0                               | 929,664                         | 0                         | 0                         | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 4          | 0                               | 943,472                         | 0                         | 0                         | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 41         | 0                               | 263,027                         | 0                         | 104,500                   | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0          | 0                               | 742,731                         | 0                         | 153                       | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0          | 0                               | 193,185                         | 0                         | 0                         | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0          | 0                               | 253,308                         | 0                         | 0                         | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0          | 0                               | 62,235                          | 0                         | 0                         | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |            |                                 |                                 |                           |                           |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 1,174      | 0                               | 2,913,546                       | 0                         | 0                         | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 1          | 0                               | 228,615                         | 0                         | 0                         | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 6          | 0                               | 275,911                         | 0                         | 0                         | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 19,275     | 0                               | 776,289                         | 0                         | 0                         | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 8,722      | 0                               | 1,952,538                       | 0                         | 0                         | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 141        | 0                               | 61,904                          | 0                         | 0                         | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 901        | 0                               | 55,166                          | 0                         | 0                         | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 5,446      | 0                               | 2,672,175                       | 85,349                    | 15,092                    | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0          | 0                               | 4,041                           | 0                         | 0                         | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0          | 0                               | 0                               | 0                         | 0                         | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 4,102      | 0                               | 468,779                         | 39,891                    | 0                         | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0          | 0                               | 465,705                         | 0                         | 0                         | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 345        | 0                               | 547,467                         | 128,749                   | 0                         | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0          | 0                               | 234,726                         | 50,590                    | 0                         | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 13         | 0                               | 204,542                         | 0                         | 0                         | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0          | 0                               | 92,452                          | 0                         | 0                         | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0          | 0                               | 698,940                         | 0                         | 0                         | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0          | 0                               | 209,043                         | 0                         | 0                         | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0          | 0                               | 970,394                         | 0                         | 0                         | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0          | 0                               | 2,300,397                       | 0                         | 0                         | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 18,493,886 | 0                               | 2,837,994                       | 0                         | 0                         | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0          | 0                               | 0                               | 0                         | 0                         | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0          | 0                               | 164,507                         | 0                         | 0                         | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0          | 0                               | 6                               | 0                         | 0                         | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |            |                                 |                                 |                           |                           |        |
| 90.00                                  | 09000 | CLINIC                                 | 4,089,992  | 0                               | 13,951                          | 7,095                     | 0                         | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 11         | 4,951,430                       | 593,631                         | 248,536                   | 0                         | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0          | 0                               | 0                               | 0                         | 0                         | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0          | 0                               | 0                               | 0                         | 0                         | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0          | 0                               | 0                               | 0                         | 0                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |            |                                 |                                 |                           |                           |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0          | 0                               | 0                               | 0                         | 0                         | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0          | 0                               | 0                               | 0                         | 0                         | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0          | 0                               | 0                               | 0                         | 0                         | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |            |                                 |                                 |                           |                           |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0          | 0                               | 167,570                         | 0                         | 0                         | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0          | 0                               | 0                               | 0                         | 0                         | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0          | 0                               | 33,089                          | 0                         | 0                         | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0          | 0                               | 0                               | 0                         | 0                         | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0          | 0                               | 5,041                           | 0                         | 0                         | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0          | 0                               | 0                               | 0                         | 0                         | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0          | 0                               | 0                               | 0                         | 0                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 22,627,517 | 11,052,298                      | 25,357,152                      | 560,210                   | 189,333                   | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |            |                                 |                                 |                           |                           |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0          | 0                               | 0                               | 0                         | 0                         | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0          | 0                               | 0                               | 0                         | 0                         | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0          | 0                               | 0                               | 0                         | 0                         | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0          | 0                               | 0                               | 0                         | 0                         | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0          | 0                               | 0                               | 0                         | 0                         | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 38,780     | 0                               | 0                               | 0                         | 0                         | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 1,280,289  | 0                               | 0                               | 0                         | 0                         | 192.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | PHARMACY   | MEDICAL<br>RECORDS &<br>LIBRARY | MEDICAL<br>RECORDS &<br>LIBRARY | OTHER GENERAL SERVICE     |                           |        |
|-------------------------|-------|-----------------------------------|------------|---------------------------------|---------------------------------|---------------------------|---------------------------|--------|
|                         |       |                                   |            |                                 |                                 | CLINICAL LAB<br>ADMIN MED | CLINICAL LAB<br>ADMIN PED |        |
|                         |       |                                   | 15.00      | 16.00                           | 16.01                           | 18.00                     | 18.01                     |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                   | 0          | 0                               | 0                               | 0                         | 0                         | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           | 287,155    | 0                               | 0                               | 0                         | 0                         | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0          | 0                               | 0                               | 0                         | 0                         | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0          | 0                               | 0                               | 0                         | 0                         | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0          | 0                               | 0                               | 0                         | 0                         | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |            |                                 |                                 |                           |                           | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0          | 0                               | 0                               | 0                         | 0                         | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 24,233,741 | 11,052,298                      | 25,357,152                      | 560,210                   | 189,333                   | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

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11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | OTHER GENERAL SERVICE    |                            |                             |                            |                            |       |
|------------------------------|-------|--------------------------------------|--------------------------|----------------------------|-----------------------------|----------------------------|----------------------------|-------|
|                              |       |                                      | CLINICAL LAB<br>ADMIN OB | CLINICAL LAB<br>ADMIN SURG | CLINICAL LAB<br>ADMIN PSYCH | CLINICAL LAB<br>ADMIN PATH | CLINICAL LAB<br>ADMIN CARD |       |
|                              |       |                                      | 18.02                    | 18.03                      | 18.04                       | 18.05                      | 18.06                      |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                          |                            |                             |                            |                            |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                          |                            |                             |                            |                            | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                          |                            |                             |                            |                            | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                          |                            |                             |                            |                            | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                          |                            |                             |                            |                            | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                          |                            |                             |                            |                            | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                          |                            |                             |                            |                            | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                          |                            |                             |                            |                            | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                          |                            |                             |                            |                            | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                          |                            |                             |                            |                            | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                          |                            |                             |                            |                            | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                          |                            |                             |                            |                            | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                          |                            |                             |                            |                            | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                          |                            |                             |                            |                            | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                          |                            |                             |                            |                            | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                          |                            |                             |                            |                            | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                          |                            |                             |                            |                            | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                          |                            |                             |                            |                            | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                          |                            |                             |                            |                            | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                          |                            |                             |                            |                            | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                          |                            |                             |                            |                            | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                          |                            |                             |                            |                            | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                          |                            |                             |                            |                            | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                          |                            |                             |                            |                            | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                          |                            |                             |                            |                            | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                          |                            |                             |                            |                            | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                          |                            |                             |                            |                            | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                          |                            |                             |                            |                            | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                          |                            |                             |                            |                            | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                          |                            |                             |                            |                            | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                          |                            |                             |                            |                            | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                          |                            |                             |                            |                            | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                          |                            |                             |                            |                            | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                          |                            |                             |                            |                            | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                          |                            |                             |                            |                            | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                          |                            |                             |                            |                            | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                          |                            |                             |                            |                            | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                          |                            |                             |                            |                            | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                          |                            |                             |                            |                            | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                          |                            |                             |                            |                            | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                          |                            |                             |                            |                            | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                          |                            |                             |                            |                            | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                          |                            |                             |                            |                            | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                          |                            |                             |                            |                            | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                          |                            |                             |                            |                            | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                          |                            |                             |                            |                            | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                          |                            |                             |                            |                            | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                          |                            |                             |                            |                            | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                          |                            |                             |                            |                            | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                          |                            |                             |                            |                            | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                          |                            |                             |                            |                            | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                          |                            |                             |                            |                            | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                          |                            |                             |                            |                            | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                          |                            |                             |                            |                            | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 2,577,482                |                            |                             |                            |                            | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                        | 3,435,642                  |                             |                            |                            | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                        | 0                          | 125,688                     |                            |                            | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                        | 0                          | 0                           | 2,101,043                  |                            | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                        | 0                          | 0                           | 0                          | 1,779,202                  | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                        | 0                          | 0                           | 0                          | 0                          | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                        | 0                          | 0                           | 0                          | 0                          | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                        | 0                          | 0                           | 0                          | 0                          | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                        | 0                          | 0                           | 0                          | 0                          | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                        | 0                          | 0                           | 0                          | 0                          | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                        | 0                          | 0                           | 0                          | 0                          | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                        | 109,139                    | 0                           | 0                          | 0                          | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                        | 0                          | 0                           | 0                          | 0                          | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                        | 0                          | 0                           | 0                          | 0                          | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                        | 0                          | 0                           | 0                          | 0                          | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                        | 0                          | 0                           | 0                          | 0                          | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                        | 0                          | 0                           | 0                          | 0                          | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                        | 0                          | 0                           | 0                          | 0                          | 23.02 |

## COST ALLOCATION - GENERAL SERVICE COSTS

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| Cost Center Description                |       |                                        | OTHER GENERAL SERVICE    |                            |                             |                            |                            |        |
|----------------------------------------|-------|----------------------------------------|--------------------------|----------------------------|-----------------------------|----------------------------|----------------------------|--------|
|                                        |       |                                        | CLINICAL LAB<br>ADMIN OB | CLINICAL LAB<br>ADMIN SURG | CLINICAL LAB<br>ADMIN PSYCH | CLINICAL LAB<br>ADMIN PATH | CLINICAL LAB<br>ADMIN CARD |        |
|                                        |       |                                        | 18.02                    | 18.03                      | 18.04                       | 18.05                      | 18.06                      |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                        | 0                          | 0                           | 0                          | 0                          | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                        | 0                          | 0                           | 0                          | 0                          | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                        | 0                          | 0                           | 0                          | 0                          | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                        | 0                          | 0                           | 0                          | 0                          | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                        | 0                          | 0                           | 0                          | 0                          | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                        | 0                          | 0                           | 0                          | 0                          | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                        | 0                          | 0                           | 0                          | 0                          | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                        | 0                          | 0                           | 0                          | 0                          | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                        | 0                          | 0                           | 0                          | 0                          | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                          |                            |                             |                            |                            |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 357,348                  | 0                          | 0                           | 0                          | 0                          | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                        | 0                          | 0                           | 0                          | 0                          | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                        | 0                          | 0                           | 0                          | 0                          | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                        | 0                          | 0                           | 0                          | 0                          | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 1,351,778                | 0                          | 0                           | 0                          | 0                          | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                        | 0                          | 0                           | 0                          | 0                          | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                        | 0                          | 0                           | 0                          | 0                          | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 216,066                  | 0                          | 0                           | 0                          | 0                          | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                          |                            |                             |                            |                            |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                        | 1,273,485                  | 0                           | 0                          | 0                          | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                        | 333,186                    | 0                           | 0                          | 0                          | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 599,322                  | 0                          | 0                           | 0                          | 0                          | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                        | 103,953                    | 0                           | 0                          | 0                          | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                        | 986,973                    | 0                           | 0                          | 0                          | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                        | 203,012                    | 0                           | 0                          | 0                          | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                        | 44,693                     | 0                           | 0                          | 0                          | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 52,968                   | 111,062                    | 0                           | 2,101,043                  | 529,845                    | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                        | 0                          | 0                           | 0                          | 0                          | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                        | 0                          | 0                           | 0                          | 0                          | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                        | 0                          | 0                           | 0                          | 0                          | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                        | 0                          | 0                           | 0                          | 0                          | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                        | 0                          | 0                           | 0                          | 0                          | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                        | 0                          | 0                           | 0                          | 0                          | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                        | 0                          | 18,750                      | 0                          | 0                          | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                        | 128,427                    | 0                           | 0                          | 0                          | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                        | 0                          | 0                           | 0                          | 1,249,357                  | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                        | 0                          | 0                           | 0                          | 0                          | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                        | 0                          | 0                           | 0                          | 0                          | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                        | 0                          | 0                           | 0                          | 0                          | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                        | 0                          | 0                           | 0                          | 0                          | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                        | 0                          | 0                           | 0                          | 0                          | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                        | 0                          | 0                           | 0                          | 0                          | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                        | 0                          | 1,938                       | 0                          | 0                          | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                          |                            |                             |                            |                            |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                        | 0                          | 105,000                     | 0                          | 0                          | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                        | 0                          | 0                           | 0                          | 0                          | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                        | 0                          | 0                           | 0                          | 0                          | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                        | 0                          | 0                           | 0                          | 0                          | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                        | 0                          | 0                           | 0                          | 0                          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                          |                            |                             |                            |                            |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                        | 0                          | 0                           | 0                          | 0                          | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                        | 0                          | 0                           | 0                          | 0                          | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                        | 0                          | 0                           | 0                          | 0                          | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                          |                            |                             |                            |                            |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                        | 99,525                     | 0                           | 0                          | 0                          | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                        | 0                          | 0                           | 0                          | 0                          | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                        | 39,565                     | 0                           | 0                          | 0                          | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                        | 0                          | 0                           | 0                          | 0                          | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                        | 2,622                      | 0                           | 0                          | 0                          | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                        | 0                          | 0                           | 0                          | 0                          | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                        | 0                          | 0                           | 0                          | 0                          | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 2,577,482                | 3,435,642                  | 125,688                     | 2,101,043                  | 1,779,202                  | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                          |                            |                             |                            |                            |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                        | 0                          | 0                           | 0                          | 0                          | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                        | 0                          | 0                           | 0                          | 0                          | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                        | 0                          | 0                           | 0                          | 0                          | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                        | 0                          | 0                           | 0                          | 0                          | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                        | 0                          | 0                           | 0                          | 0                          | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                        | 0                          | 0                           | 0                          | 0                          | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                        | 0                          | 0                           | 0                          | 0                          | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                        | 0                          | 0                           | 0                          | 0                          | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                        | 0                          | 0                           | 0                          | 0                          | 194.01 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | OTHER GENERAL SERVICE    |                            |                             |                            |                            |        |
|-------------------------|-------|-----------------------------------|--------------------------|----------------------------|-----------------------------|----------------------------|----------------------------|--------|
|                         |       |                                   | CLINICAL LAB<br>ADMIN OB | CLINICAL LAB<br>ADMIN SURG | CLINICAL LAB<br>ADMIN PSYCH | CLINICAL LAB<br>ADMIN PATH | CLINICAL LAB<br>ADMIN CARD |        |
|                         |       |                                   | 18.02                    | 18.03                      | 18.04                       | 18.05                      | 18.06                      |        |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                        | 0                          | 0                           | 0                          | 0                          | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                        | 0                          | 0                           | 0                          | 0                          | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                        | 0                          | 0                           | 0                          | 0                          | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                          |                            |                             |                            |                            | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                        | 0                          | 0                           | 0                          | 0                          | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 2,577,482                | 3,435,642                  | 125,688                     | 2,101,043                  | 1,779,202                  | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | OTHER GENERAL SERVICE       |                            |                            |                             |                                   |       |
|------------------------------|-------|--------------------------------------|-----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------------|-------|
|                              |       |                                      | CLINICAL LAB<br>ADMIN HEMAT | CLINICAL LAB<br>ADMIN NEUR | CLINICAL LAB<br>ADMIN OCLS | DISCRETIONARY<br>OPERATIONS | RUSH<br>UNIVERSITY<br>ADMIN SPLIT |       |
|                              |       |                                      | 18.07                       | 18.08                      | 18.09                      | 18.12                       | 18.14                             |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                             |                            |                            |                             |                                   |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                             |                            |                            |                             |                                   | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                             |                            |                            |                             |                                   | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                             |                            |                            |                             |                                   | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                             |                            |                            |                             |                                   | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                             |                            |                            |                             |                                   | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                             |                            |                            |                             |                                   | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                             |                            |                            |                             |                                   | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                             |                            |                            |                             |                                   | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                             |                            |                            |                             |                                   | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                             |                            |                            |                             |                                   | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                             |                            |                            |                             |                                   | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                             |                            |                            |                             |                                   | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                             |                            |                            |                             |                                   | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                             |                            |                            |                             |                                   | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                             |                            |                            |                             |                                   | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                             |                            |                            |                             |                                   | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                             |                            |                            |                             |                                   | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                             |                            |                            |                             |                                   | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                             |                            |                            |                             |                                   | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                             |                            |                            |                             |                                   | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                             |                            |                            |                             |                                   | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                             |                            |                            |                             |                                   | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                             |                            |                            |                             |                                   | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                             |                            |                            |                             |                                   | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                             |                            |                            |                             |                                   | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                             |                            |                            |                             |                                   | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                             |                            |                            |                             |                                   | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                             |                            |                            |                             |                                   | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                             |                            |                            |                             |                                   | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                             |                            |                            |                             |                                   | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                             |                            |                            |                             |                                   | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                             |                            |                            |                             |                                   | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                             |                            |                            |                             |                                   | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                             |                            |                            |                             |                                   | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                             |                            |                            |                             |                                   | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                             |                            |                            |                             |                                   | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                             |                            |                            |                             |                                   | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                             |                            |                            |                             |                                   | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                             |                            |                            |                             |                                   | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                             |                            |                            |                             |                                   | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                             |                            |                            |                             |                                   | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                             |                            |                            |                             |                                   | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                             |                            |                            |                             |                                   | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                             |                            |                            |                             |                                   | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                             |                            |                            |                             |                                   | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                             |                            |                            |                             |                                   | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                             |                            |                            |                             |                                   | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                             |                            |                            |                             |                                   | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                             |                            |                            |                             |                                   | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                             |                            |                            |                             |                                   | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                             |                            |                            |                             |                                   | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                             |                            |                            |                             |                                   | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                             |                            |                            |                             |                                   | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                             |                            |                            |                             |                                   | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              |                             |                            |                            |                             |                                   | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             |                             |                            |                            |                             |                                   | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              |                             |                            |                            |                             |                                   | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              |                             |                            |                            |                             |                                   | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                           |                            |                            |                             |                                   | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                           | 2,030,853                  |                            |                             |                                   | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                           | 0                          | 2,968,345                  |                             |                                   | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                           | 0                          | 0                          | -362,862                    |                                   | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                           | 0                          | 0                          | 0                           | 25,080,181                        | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                           | 0                          | 0                          | 0                           | 10,125,465                        | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                           | 0                          | 0                          | 0                           | 0                                 | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                           | 0                          | 0                          | 0                           | 0                                 | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                           | 0                          | 0                          | 0                           | 0                                 | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                           | 0                          | 0                          | 0                           | 0                                 | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                           | 0                          | 0                          | 0                           | 591,758                           | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                           | 0                          | 0                          | 0                           | 536,292                           | 23.01 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

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Part I  
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11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | OTHER GENERAL SERVICE       |                            |                            |                             |                                   |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------------|--------|
|                                        |       |                                        | CLINICAL LAB<br>ADMIN HEMAT | CLINICAL LAB<br>ADMIN NEUR | CLINICAL LAB<br>ADMIN OCLS | DISCRETIONARY<br>OPERATIONS | RUSH<br>UNIVERSITY<br>ADMIN SPLIT |        |
|                                        |       |                                        | 18.07                       | 18.08                      | 18.09                      | 18.12                       | 18.14                             |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                           | 0                          | 0                          | 0                           | 421,988                           | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                           | 0                          | 0                          | 0                           | 1,462,342                         | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                           | 0                          | 0                          | 0                           | 1,084,951                         | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                           | 0                          | 0                          | 0                           | 0                                 | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                           | 0                          | 0                          | 0                           | 0                                 | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                           | 0                          | 0                          | 0                           | 903,564                           | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                           | 0                          | 0                          | 0                           | 329,046                           | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                           | 0                          | 0                          | 0                           | 0                                 | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                           | 0                          | 0                          | 0                           | 362,025                           | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                           | 0                          | 0                          | 0                           | 1,425,615                         | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                             |                            |                            |                             |                                   |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                           | 0                          | 0                          | 0                           | 0                                 | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                           | 0                          | 0                          | 0                           | 0                                 | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                           | 0                          | 0                          | 0                           | 0                                 | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                           | 0                          | 0                          | 0                           | 0                                 | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                           | 0                          | 0                          | 0                           | 0                                 | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                           | 0                          | 0                          | 0                           | 0                                 | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                             |                            |                            |                             |                                   |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                           | 206,257                    | 0                          | 0                           | 0                                 | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                           | 0                          | 0                          | 0                           | 0                                 | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                           | 0                          | 0                          | 0                           | 0                                 | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                           | 0                          | 0                          | 0                           | 0                                 | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                           | 0                          | 0                          | 0                           | 0                                 | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                           | 0                          | 0                          | 0                           | 0                                 | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                           | 0                          | 0                          | 0                           | 0                                 | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                           | 0                          | 2,561,807                  | 0                           | 0                                 | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                           | 0                          | 86,697                     | 0                           | 0                                 | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                           | 0                          | 0                          | 0                           | 0                                 | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                           | 0                          | 319,841                    | 0                           | 0                                 | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                           | 0                          | 0                          | 0                           | 0                                 | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                           | 0                          | 0                          | 0                           | 0                                 | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                           | 0                          | 0                          | 0                           | 0                                 | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                           | 0                          | 0                          | 0                           | 0                                 | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                           | 0                          | 0                          | 0                           | 0                                 | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                           | 338,095                    | 0                          | 0                           | 0                                 | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                           | 0                          | 0                          | 0                           | 0                                 | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                           | 0                          | 0                          | 0                           | 0                                 | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                           | 0                          | 0                          | 0                           | 0                                 | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                           | 0                          | 0                          | 0                           | 0                                 | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                           | 0                          | 0                          | 0                           | 0                                 | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                           | 0                          | 0                          | 0                           | 0                                 | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                             |                            |                            |                             |                                   |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                           | 1,486,501                  | 0                          | 0                           | 0                                 | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                           | 0                          | 0                          | 0                           | 0                                 | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                           | 0                          | 0                          | 0                           | 0                                 | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                           | 0                          | 0                          | 0                           | 0                                 | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                             |                            |                            |                             |                                   |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                           | 0                          | 0                          | 0                           | 0                                 | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                           | 0                          | 0                          | 0                           | 0                                 | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                           | 0                          | 0                          | 0                           | 0                                 | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                             |                            |                            |                             |                                   |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                           | 0                          | 0                          | 0                           | 0                                 | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                           | 0                          | 0                          | 0                           | 0                                 | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                           | 0                          | 0                          | 0                           | 0                                 | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                           | 0                          | 0                          | 0                           | 0                                 | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                           | 0                          | 0                          | 0                           | 0                                 | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                           | 2,030,853                  | 2,968,345                  | 0                           | 17,243,046                        | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                             |                            |                            |                             |                                   |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                           | 0                          | 0                          | 0                           | 1,378,020                         | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                           | 0                          | 0                          | 0                           | 0                                 | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                           | 0                          | 0                          | 0                           | 0                                 | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                           | 0                          | 0                          | 0                           | 0                                 | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                           | 0                          | 0                          | 0                           | 0                                 | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                           | 0                          | 0                          | 0                           | 0                                 | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                           | 0                          | 0                          | 0                           | 0                                 | 192.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | OTHER GENERAL SERVICE       |                            |                            |                             |                                   |        |
|-------------------------|-------|-----------------------------------|-----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------------|--------|
|                         |       |                                   | CLINICAL LAB<br>ADMIN HEMAT | CLINICAL LAB<br>ADMIN NEUR | CLINICAL LAB<br>ADMIN OCLS | DISCRETIONARY<br>OPERATIONS | RUSH<br>UNIVERSITY<br>ADMIN SPLIT |        |
|                         |       |                                   | 18.07                       | 18.08                      | 18.09                      | 18.12                       | 18.14                             |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                   | 0                           | 0                          | 0                          | 0                           | 6,459,115                         | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           | 0                           | 0                          | 0                          | 0                           | 0                                 | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                           | 0                          | 0                          | 0                           | 0                                 | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                           | 0                          | 0                          | 0                           | 0                                 | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                           | 0                          | 0                          | 0                           | 0                                 | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                             |                            |                            |                             |                                   | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                           | 0                          | 0                          | -362,862                    | 0                                 | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 0                           | 2,030,853                  | 2,968,345                  | -362,862                    | 25,080,181                        | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | OTHER GENERAL  | NONPHYSICIAN | NURSING SCHOOL | INTERNS & RESIDENTS |                |       |                |
|------------------------------|-------|--------------------------------------|----------------|--------------|----------------|---------------------|----------------|-------|----------------|
|                              |       |                                      | SERVICE        |              |                | ANESTHETISTS        | SERVICES-SALAR |       | SERVICES-OTHER |
|                              |       |                                      | NURSING SCHOOL |              |                |                     | Y & FRINGES    |       | PRGM COSTS     |
|                              |       |                                      | SPLIT          |              |                |                     |                |       |                |
|                              |       |                                      | 18.16          | 19.00        | 20.00          | 21.00               | 22.00          |       |                |
| GENERAL SERVICE COST CENTERS |       |                                      |                |              |                |                     |                |       |                |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                |              |                |                     |                | 1.00  |                |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                |              |                |                     |                | 1.01  |                |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                |              |                |                     |                | 1.02  |                |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                |              |                |                     |                | 1.03  |                |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                |              |                |                     |                | 1.04  |                |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                |              |                |                     |                | 1.05  |                |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                |              |                |                     |                | 1.06  |                |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                |              |                |                     |                | 1.07  |                |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                |              |                |                     |                | 1.08  |                |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                |              |                |                     |                | 1.09  |                |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                |              |                |                     |                | 1.10  |                |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                |              |                |                     |                | 1.11  |                |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                |              |                |                     |                | 1.12  |                |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                |              |                |                     |                | 1.13  |                |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                |              |                |                     |                | 1.14  |                |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                |              |                |                     |                | 1.15  |                |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                |              |                |                     |                | 1.16  |                |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                |              |                |                     |                | 1.17  |                |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                |              |                |                     |                | 2.00  |                |
| 2.01                         | 00201 | INTEREST GENERAL                     |                |              |                |                     |                | 2.01  |                |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                |              |                |                     |                | 2.02  |                |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                |              |                |                     |                | 2.03  |                |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                |              |                |                     |                | 2.04  |                |
| 2.05                         | 00205 | INTEREST TOB                         |                |              |                |                     |                | 2.05  |                |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                |              |                |                     |                | 2.06  |                |
| 2.07                         | 00207 | INTEREST TOWER                       |                |              |                |                     |                | 2.07  |                |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                |              |                |                     |                | 2.08  |                |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                |              |                |                     |                | 4.00  |                |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                |              |                |                     |                | 5.01  |                |
| 5.02                         | 00540 | PARKING GARAGE                       |                |              |                |                     |                | 5.02  |                |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                |              |                |                     |                | 5.03  |                |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                |              |                |                     |                | 5.04  |                |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                |              |                |                     |                | 5.05  |                |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                |              |                |                     |                | 5.06  |                |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                |              |                |                     |                | 5.07  |                |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                |              |                |                     |                | 5.08  |                |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                |              |                |                     |                | 5.09  |                |
| 5.10                         | 00598 | RESEARCH SPA                         |                |              |                |                     |                | 5.10  |                |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                |              |                |                     |                | 5.11  |                |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                |              |                |                     |                | 6.00  |                |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                |              |                |                     |                | 6.01  |                |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                |              |                |                     |                | 8.00  |                |
| 9.00                         | 00900 | HOUSEKEEPING                         |                |              |                |                     |                | 9.00  |                |
| 10.00                        | 01000 | DIETARY                              |                |              |                |                     |                | 10.00 |                |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                |              |                |                     |                | 10.01 |                |
| 11.00                        | 01100 | CAFETERIA                            |                |              |                |                     |                | 11.00 |                |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                |              |                |                     |                | 13.00 |                |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                |              |                |                     |                | 14.00 |                |
| 15.00                        | 01500 | PHARMACY                             |                |              |                |                     |                | 15.00 |                |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                |              |                |                     |                | 16.00 |                |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                |              |                |                     |                | 16.01 |                |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                |              |                |                     |                | 18.00 |                |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                |              |                |                     |                | 18.01 |                |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                |              |                |                     |                | 18.02 |                |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              |                |              |                |                     |                | 18.03 |                |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             |                |              |                |                     |                | 18.04 |                |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              |                |              |                |                     |                | 18.05 |                |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              |                |              |                |                     |                | 18.06 |                |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             |                |              |                |                     |                | 18.07 |                |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              |                |              |                |                     |                | 18.08 |                |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              |                |              |                |                     |                | 18.09 |                |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             |                |              |                |                     |                | 18.12 |                |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          |                |              |                |                     |                | 18.14 |                |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 33,666,354     |              |                |                     |                | 18.16 |                |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0              | 1,309,461    |                |                     |                | 19.00 |                |
| 20.00                        | 02000 | NURSING SCHOOL                       | 30,252,586     |              | 8,407,850      |                     |                | 20.00 |                |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0              |              |                | 64,122,172          |                | 21.00 |                |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0              |              |                |                     | 11,246,845     | 22.00 |                |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0              |              |                |                     |                | 23.00 |                |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0              |              |                |                     |                | 23.01 |                |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0              |              |                |                     |                | 23.02 |                |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | OTHER GENERAL SERVICE | NONPHYSICIAN ANESTHETISTS | NURSING SCHOOL | INTERNS & RESIDENTS        |                           |        |
|----------------------------------------|-------|----------------------------------------|-----------------------|---------------------------|----------------|----------------------------|---------------------------|--------|
|                                        |       |                                        | NURSING SCHOOL SPLIT  |                           |                | SERVICES-SALAR Y & FRINGES | SERVICES-OTHER PRGM COSTS |        |
|                                        |       |                                        | 18.16                 |                           |                | 21.00                      | 22.00                     |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                     |                           |                |                            |                           | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                     |                           |                |                            |                           | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                     |                           |                |                            |                           | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                     |                           |                |                            |                           | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                     |                           |                |                            |                           | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                     |                           |                |                            |                           | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                     |                           |                |                            |                           | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                     |                           |                |                            |                           | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                     |                           |                |                            |                           | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                       |                           |                |                            |                           |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                     | 0                         | 6,375,282      | 12,004,651                 | 2,105,584                 | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                     | 0                         | 15,732         | 1,755,279                  | 307,871                   | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                     | 0                         | 0              | 3,809,625                  | 668,197                   | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                     | 0                         | 0              | 607,919                    | 106,627                   | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                     | 0                         | 357,640        | 753,260                    | 132,120                   | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                     | 0                         | 662,140        | 981,055                    | 172,074                   | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                     | 0                         | 325,826        | 472,360                    | 82,851                    | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                     | 0                         | 0              | 139,751                    | 24,512                    | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                       |                           |                |                            |                           |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                     | 0                         | 0              | 4,852,171                  | 851,057                   | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                     | 0                         | 0              | 0                          | 0                         | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                     | 0                         | 0              | 642,857                    | 112,755                   | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                     | 1,309,461                 | 671,230        | 4,494,408                  | 788,306                   | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                     | 0                         | 0              | 5,847,202                  | 1,025,582                 | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                     | 0                         | 0              | 859,472                    | 150,749                   | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                     | 0                         | 0              | 651,242                    | 114,226                   | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                     | 0                         | 0              | 2,282,142                  | 400,281                   | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                     | 0                         | 0              | 0                          | 0                         | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                     | 0                         | 0              | 0                          | 0                         | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                     | 0                         | 0              | 213,820                    | 37,503                    | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                     | 0                         | 0              | 0                          | 0                         | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                     | 0                         | 0              | 526,863                    | 92,410                    | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                     | 0                         | 0              | 0                          | 0                         | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                     | 0                         | 0              | 0                          | 0                         | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                     | 0                         | 0              | 0                          | 0                         | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                     | 0                         | 0              | 881,832                    | 154,671                   | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                     | 0                         | 0              | 0                          | 0                         | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                     | 0                         | 0              | 0                          | 0                         | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                     | 0                         | 0              | 0                          | 0                         | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                     | 0                         | 0              | 0                          | 0                         | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                     | 0                         | 0              | 0                          | 0                         | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                     | 0                         | 0              | 992,236                    | 174,035                   | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                     | 0                         | 0              | 2,051,552                  | 359,836                   | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                       |                           |                |                            |                           |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                     | 0                         | 0              | 8,090,213                  | 1,419,000                 | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                     | 0                         | 0              | 3,813,818                  | 668,933                   | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                     | 0                         | 0              | 0                          | 0                         | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                     | 0                         | 0              | 0                          | 0                         | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                     | 0                         | 0              | 0                          | 0                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                       |                           |                |                            |                           |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                     | 0                         | 0              | 0                          | 0                         | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                     | 0                         | 0              | 0                          | 0                         | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                     | 0                         | 0              | 0                          | 0                         | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                       |                           |                |                            |                           |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                     | 0                         | 0              | 141,149                    | 24,757                    | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                     | 0                         | 0              | 0                          | 0                         | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                     | 0                         | 0              | 0                          | 0                         | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                     | 0                         | 0              | 0                          | 0                         | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                     | 0                         | 0              | 0                          | 0                         | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                     | 0                         | 0              | 0                          | 0                         | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                     | 0                         | 0              | 0                          | 0                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 30,252,586            | 1,309,461                 | 8,407,850      | 56,864,877                 | 9,973,937                 | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                       |                           |                |                            |                           |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 3,413,768             | 0                         | 0              | 0                          | 0                         | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                     | 0                         | 0              | 0                          | 0                         | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                     | 0                         | 0              | 0                          | 0                         | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                     | 0                         | 0              | 0                          | 0                         | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                     | 0                         | 0              | 0                          | 0                         | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                     | 0                         | 0              | 3,636,334                  | 637,802                   | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                     | 0                         | 0              | 3,609,781                  | 633,145                   | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                     | 0                         | 0              | 11,180                     | 1,961                     | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                     | 0                         | 0              | 0                          | 0                         | 194.01 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

 Period:  
 From 07/01/2018  
 To 06/30/2019

 Worksheet B  
 Part I  
 Date/Time Prepared:  
 11/24/2019 4:22 pm

| Cost Center Description |       |                                   | OTHER GENERAL<br>SERVICE | NONPHYSICIAN<br>ANESTHETISTS | NURSING SCHOOL | INTERNS & RESIDENTS           |                              |          |
|-------------------------|-------|-----------------------------------|--------------------------|------------------------------|----------------|-------------------------------|------------------------------|----------|
|                         |       |                                   | NURSING SCHOOL<br>SPLIT  |                              |                | SERVICES-SALAR<br>Y & FRINGES | SERVICES-OTHER<br>PRGM COSTS |          |
|                         |       |                                   | 18.16                    |                              |                | 21.00                         | 22.00                        |          |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                        | 0                            | 0              | 0                             | 0                            | 0 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                        | 0                            | 0              | 0                             | 0                            | 0 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                        | 0                            | 0              | 0                             | 0                            | 0 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                          | 0                            | 0              | 0                             | 0                            | 0 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                        | 0                            | 0              | 0                             | 0                            | 0 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 33,666,354               | 1,309,461                    | 8,407,850      | 64,122,172                    | 11,246,845                   | 202.00   |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | PARAMED HEALTH<br>SYSTEM<br>MANAGEMENT | PARAMED<br>MEDICAL<br>PERFUSION TECH | PARAMED<br>DIETARY | PARAMED SPEECH | PARAMED<br>OCCUPATIONAL<br>THERAPY |       |
|------------------------------|-------|--------------------------------------|----------------------------------------|--------------------------------------|--------------------|----------------|------------------------------------|-------|
|                              |       |                                      | 23.00                                  | 23.01                                | 23.02              | 23.03          | 23.04                              |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                        |                                      |                    |                |                                    |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                        |                                      |                    |                |                                    | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                        |                                      |                    |                |                                    | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                        |                                      |                    |                |                                    | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                        |                                      |                    |                |                                    | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                        |                                      |                    |                |                                    | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                        |                                      |                    |                |                                    | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                        |                                      |                    |                |                                    | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                        |                                      |                    |                |                                    | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                        |                                      |                    |                |                                    | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                        |                                      |                    |                |                                    | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                                        |                                      |                    |                |                                    | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                                        |                                      |                    |                |                                    | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                                        |                                      |                    |                |                                    | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                                        |                                      |                    |                |                                    | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                                        |                                      |                    |                |                                    | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                                        |                                      |                    |                |                                    | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                                        |                                      |                    |                |                                    | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                                        |                                      |                    |                |                                    | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                        |                                      |                    |                |                                    | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                        |                                      |                    |                |                                    | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                                        |                                      |                    |                |                                    | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                                        |                                      |                    |                |                                    | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                                        |                                      |                    |                |                                    | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                                        |                                      |                    |                |                                    | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                                        |                                      |                    |                |                                    | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                                        |                                      |                    |                |                                    | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                                        |                                      |                    |                |                                    | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                                        |                                      |                    |                |                                    | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                                        |                                      |                    |                |                                    | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                                        |                                      |                    |                |                                    | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                                        |                                      |                    |                |                                    | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                                        |                                      |                    |                |                                    | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                                        |                                      |                    |                |                                    | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                                        |                                      |                    |                |                                    | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                                        |                                      |                    |                |                                    | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                                        |                                      |                    |                |                                    | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                                        |                                      |                    |                |                                    | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                                        |                                      |                    |                |                                    | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                                        |                                      |                    |                |                                    | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                                        |                                      |                    |                |                                    | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                                        |                                      |                    |                |                                    | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                                        |                                      |                    |                |                                    | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                                        |                                      |                    |                |                                    | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                                        |                                      |                    |                |                                    | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                                        |                                      |                    |                |                                    | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                                        |                                      |                    |                |                                    | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                                        |                                      |                    |                |                                    | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                                        |                                      |                    |                |                                    | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                                        |                                      |                    |                |                                    | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                                        |                                      |                    |                |                                    | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                                        |                                      |                    |                |                                    | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                                        |                                      |                    |                |                                    | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                                        |                                      |                    |                |                                    | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                                        |                                      |                    |                |                                    | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              |                                        |                                      |                    |                |                                    | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             |                                        |                                      |                    |                |                                    | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              |                                        |                                      |                    |                |                                    | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              |                                        |                                      |                    |                |                                    | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             |                                        |                                      |                    |                |                                    | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              |                                        |                                      |                    |                |                                    | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              |                                        |                                      |                    |                |                                    | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             |                                        |                                      |                    |                |                                    | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          |                                        |                                      |                    |                |                                    | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 |                                        |                                      |                    |                |                                    | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            |                                        |                                      |                    |                |                                    | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       |                                        |                                      |                    |                |                                    | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD |                                        |                                      |                    |                |                                    | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD |                                        |                                      |                    |                |                                    | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 1,412,450                              |                                      |                    |                |                                    | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       |                                        | 235,288                              |                    |                |                                    | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      |                                        |                                      | -16,165            |                |                                    | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       |                                        |                                      |                    | -56,792        |                                    | 23.03 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PARAMED HEALTH<br>SYSTEM<br>MANAGEMENT | PARAMED<br>MEDICAL<br>PERFUSION TECH | PARAMED<br>DIETARY | PARAMED SPEECH | PARAMED<br>OCCUPATIONAL<br>THERAPY |        |
|----------------------------------------|-------|----------------------------------------|----------------------------------------|--------------------------------------|--------------------|----------------|------------------------------------|--------|
|                                        |       |                                        | 23.00                                  | 23.01                                | 23.02              | 23.03          | 23.04                              |        |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           |                                        |                                      |                    |                | 110,473                            | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                |                                        |                                      |                    |                |                                    | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  |                                        |                                      |                    |                |                                    | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     |                                        |                                      |                    |                |                                    | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            |                                        |                                      |                    |                |                                    | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       |                                        |                                      |                    |                |                                    | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            |                                        |                                      |                    |                |                                    | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           |                                        |                                      |                    |                |                                    | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                        |                                      |                    |                |                                    |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 218,723                                | 0                                    | 0                  | 0              | 0                                  | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 51,822                                 | 0                                    | 0                  | 0              | 0                                  | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 59,003                                 | 0                                    | 0                  | 0              | 0                                  | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 17,323                                 | 0                                    | 0                  | 0              | 0                                  | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 38,208                                 | 0                                    | 0                  | 0              | 0                                  | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 17,125                                 | 0                                    | 0                  | 0              | 0                                  | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 16,026                                 | 0                                    | 0                  | 0              | 0                                  | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                      | 0                                    | 0                  | 0              | 0                                  | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                        |                                      |                    |                |                                    |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 266,901                                | 0                                    | 0                  | 0              | 0                                  | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 18,959                                 | 0                                    | 0                  | 0              | 0                                  | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 19,029                                 | 0                                    | 0                  | 0              | 0                                  | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 23,245                                 | 0                                    | 0                  | 0              | 0                                  | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 81,094                                 | 0                                    | 0                  | 0              | 0                                  | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 24,924                                 | 0                                    | 0                  | 0              | 0                                  | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 9,196                                  | 0                                    | 0                  | 0              | 0                                  | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 148,510                                | 235,288                              | 0                  | 0              | 0                                  | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 4,039                                  | 0                                    | 0                  | 0              | 0                                  | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    |                                        |                                      |                    |                |                                    | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 24,860                                 | 0                                    | 0                  | 0              | 0                                  | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 3                                      | 0                                    | 0                  | 0              | 0                                  | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 24,239                                 | 0                                    | 0                  | 0              | 0                                  | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 14,127                                 | 0                                    | 0                  | 0              | 0                                  | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 11,009                                 | 0                                    | 0                  | 0              | 110,473                            | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 8,114                                  | 0                                    | 0                  | 0              | 0                                  | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 56,871                                 | 0                                    | 0                  | 0              | 0                                  | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 3,990                                  | 0                                    | 0                  | 0              | 0                                  | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                      | 0                                    | 0                  | 0              | 0                                  | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                      | 0                                    | 0                  | 0              | 0                                  | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                      | 0                                    | 0                  | 0              | 0                                  | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                      | 0                                    | 0                  | 0              | 0                                  | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 7,303                                  | 0                                    | 0                  | 0              | 0                                  | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 9,035                                  | 0                                    | 0                  | 0              | 0                                  | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                        |                                      |                    |                |                                    |        |
| 90.00                                  | 09000 | CLINIC                                 | 178,103                                | 0                                    | 0                  | 0              | 0                                  | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 40,905                                 | 0                                    | 0                  | 0              | 0                                  | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   |                                        |                                      |                    |                |                                    | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                      | 0                                    | 0                  | 0              | 0                                  | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                      | 0                                    | 0                  | 0              | 0                                  | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                        |                                      |                    |                |                                    |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                      | 0                                    | 0                  | 0              | 0                                  | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                      | 0                                    | 0                  | 0              | 0                                  | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                      | 0                                    | 0                  | 0              | 0                                  | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                        |                                      |                    |                |                                    |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 14,187                                 | 0                                    | 0                  | 0              | 0                                  | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                      | 0                                    | 0                  | 0              | 0                                  | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 4,899                                  | 0                                    | 0                  | 0              | 0                                  | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                      | 0                                    | 0                  | 0              | 0                                  | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 678                                    | 0                                    | 0                  | 0              | 0                                  | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                      | 0                                    | 0                  | 0              | 0                                  | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               |                                        |                                      |                    |                |                                    | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 1,412,450                              | 235,288                              | 0                  | 0              | 110,473                            | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                        |                                      |                    |                |                                    |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                      | 0                                    | 0                  | 0              | 0                                  | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                      | 0                                    | 0                  | 0              | 0                                  | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                      | 0                                    | 0                  | 0              | 0                                  | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                                      | 0                                    | 0                  | 0              | 0                                  | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                                      | 0                                    | 0                  | 0              | 0                                  | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                                      | 0                                    | 0                  | 0              | 0                                  | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                                      | 0                                    | 0                  | 0              | 0                                  | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                                      | 0                                    | 0                  | 0              | 0                                  | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                                      | 0                                    | 0                  | 0              | 0                                  | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 0                                      | 0                                    | 0                  | 0              | 0                                  | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 0                                      | 0                                    | 0                  | 0              | 0                                  | 194.03 |

## COST ALLOCATION - GENERAL SERVICE COSTS

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11/24/2019 4:22 pm

| Cost Center Description |       |                                   | PARAMED HEALTH<br>SYSTEM<br>MANAGEMENT<br>23.00 | PARAMED<br>MEDICAL<br>PERFUSION TECH<br>23.01 | PARAMED<br>DIETARY<br>23.02 | PARAMED SPEECH<br>23.03 | PARAMED<br>OCCUPATIONAL<br>THERAPY<br>23.04 |        |
|-------------------------|-------|-----------------------------------|-------------------------------------------------|-----------------------------------------------|-----------------------------|-------------------------|---------------------------------------------|--------|
| 194.04                  | 07954 | CON - GNE                         | 0                                               | 0                                             | 0                           | 0                       | 0                                           | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            | 0                                               | 0                                             | 0                           | 0                       | 0                                           | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                                               | 0                                             | -16,165                     | -56,792                 | 0                                           | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 1,412,450                                       | 235,288                                       | -16,165                     | -56,792                 | 110,473                                     | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

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Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | PARAMED<br>MEDICAL<br>PHYSICS | PARAMED<br>PASTORAL CARE | PARAMED<br>TECHNOLOGY | PARAMED<br>VASCULAR<br>ULTRASOUND | PARAMED<br>PHARMACY |       |
|------------------------------|-------|--------------------------------------|-------------------------------|--------------------------|-----------------------|-----------------------------------|---------------------|-------|
|                              |       |                                      | 23.05                         | 23.06                    | 23.07                 | 23.08                             | 23.09               |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                               |                          |                       |                                   |                     |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                               |                          |                       |                                   |                     | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                               |                          |                       |                                   |                     | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                               |                          |                       |                                   |                     | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                               |                          |                       |                                   |                     | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                               |                          |                       |                                   |                     | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                               |                          |                       |                                   |                     | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                               |                          |                       |                                   |                     | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                               |                          |                       |                                   |                     | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                               |                          |                       |                                   |                     | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                               |                          |                       |                                   |                     | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                               |                          |                       |                                   |                     | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                               |                          |                       |                                   |                     | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                               |                          |                       |                                   |                     | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                               |                          |                       |                                   |                     | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                               |                          |                       |                                   |                     | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                               |                          |                       |                                   |                     | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                               |                          |                       |                                   |                     | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                               |                          |                       |                                   |                     | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                               |                          |                       |                                   |                     | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                               |                          |                       |                                   |                     | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                               |                          |                       |                                   |                     | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                               |                          |                       |                                   |                     | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                               |                          |                       |                                   |                     | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                               |                          |                       |                                   |                     | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                               |                          |                       |                                   |                     | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                               |                          |                       |                                   |                     | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                               |                          |                       |                                   |                     | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                               |                          |                       |                                   |                     | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                               |                          |                       |                                   |                     | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                               |                          |                       |                                   |                     | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                               |                          |                       |                                   |                     | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                               |                          |                       |                                   |                     | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                               |                          |                       |                                   |                     | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                               |                          |                       |                                   |                     | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                               |                          |                       |                                   |                     | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                               |                          |                       |                                   |                     | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                               |                          |                       |                                   |                     | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                               |                          |                       |                                   |                     | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                               |                          |                       |                                   |                     | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                               |                          |                       |                                   |                     | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                               |                          |                       |                                   |                     | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                               |                          |                       |                                   |                     | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                               |                          |                       |                                   |                     | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                               |                          |                       |                                   |                     | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                               |                          |                       |                                   |                     | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                               |                          |                       |                                   |                     | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                               |                          |                       |                                   |                     | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                               |                          |                       |                                   |                     | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                               |                          |                       |                                   |                     | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                               |                          |                       |                                   |                     | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                               |                          |                       |                                   |                     | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                               |                          |                       |                                   |                     | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                               |                          |                       |                                   |                     | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                               |                          |                       |                                   |                     | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              |                               |                          |                       |                                   |                     | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             |                               |                          |                       |                                   |                     | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              |                               |                          |                       |                                   |                     | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              |                               |                          |                       |                                   |                     | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             |                               |                          |                       |                                   |                     | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              |                               |                          |                       |                                   |                     | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              |                               |                          |                       |                                   |                     | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             |                               |                          |                       |                                   |                     | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          |                               |                          |                       |                                   |                     | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 |                               |                          |                       |                                   |                     | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            |                               |                          |                       |                                   |                     | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       |                               |                          |                       |                                   |                     | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD |                               |                          |                       |                                   |                     | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD |                               |                          |                       |                                   |                     | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     |                               |                          |                       |                                   |                     | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       |                               |                          |                       |                                   |                     | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      |                               |                          |                       |                                   |                     | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       |                               |                          |                       |                                   |                     | 23.03 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PARAMED<br>MEDICAL<br>PHYSICS | PARAMED<br>PASTORAL CARE | PARAMED<br>TECHNOLOGY | PARAMED<br>VASCULAR<br>ULTRASOUND | PARAMED<br>PHARMACY |        |
|----------------------------------------|-------|----------------------------------------|-------------------------------|--------------------------|-----------------------|-----------------------------------|---------------------|--------|
|                                        |       |                                        | 23.05                         | 23.06                    | 23.07                 | 23.08                             | 23.09               |        |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 431,211                       | 986,601                  | 173,609               | 89,550                            | 1,017,024           | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                |                               |                          |                       |                                   |                     | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  |                               |                          |                       |                                   |                     | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     |                               |                          |                       |                                   |                     | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            |                               |                          |                       |                                   |                     | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       |                               |                          |                       |                                   |                     | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            |                               |                          |                       |                                   |                     | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           |                               |                          |                       |                                   |                     | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                               |                          |                       |                                   |                     |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                             | 152,805                  | 0                     | 0                                 | 0                   | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                             | 36,204                   | 0                     | 0                                 | 0                   | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                             | 41,221                   | 0                     | 0                                 | 0                   | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                             | 12,102                   | 0                     | 0                                 | 0                   | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                             | 26,693                   | 0                     | 0                                 | 0                   | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                             | 11,964                   | 0                     | 0                                 | 0                   | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                             | 11,196                   | 0                     | 0                                 | 0                   | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                             | 0                        | 0                     | 0                                 | 0                   | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                               |                          |                       |                                   |                     |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                             | 186,295                  | 0                     | 0                                 | 0                   | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                             | 13,245                   | 0                     | 0                                 | 0                   | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                             | 13,294                   | 0                     | 0                                 | 0                   | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                             | 16,239                   | 0                     | 0                                 | 0                   | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 215,605                       | 56,654                   | 0                     | 44,775                            | 0                   | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 215,606                       | 17,413                   | 0                     | 44,775                            | 0                   | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                             | 6,424                    | 0                     | 0                                 | 0                   | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                             | 103,752                  | 173,609               | 0                                 | 0                   | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                             | 2,822                    | 0                     | 0                                 | 0                   | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                             | 0                        | 0                     | 0                                 | 0                   | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                             | 17,368                   | 0                     | 0                                 | 0                   | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                             | 2                        | 0                     | 0                                 | 0                   | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                             | 16,934                   | 0                     | 0                                 | 0                   | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                             | 9,870                    | 0                     | 0                                 | 0                   | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                             | 7,691                    | 0                     | 0                                 | 0                   | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                             | 5,669                    | 0                     | 0                                 | 0                   | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                             | 39,731                   | 0                     | 0                                 | 0                   | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                             | 2,788                    | 0                     | 0                                 | 0                   | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                             | 0                        | 0                     | 0                                 | 0                   | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                             | 0                        | 0                     | 0                                 | 0                   | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                             | 0                        | 0                     | 0                                 | 1,017,024           | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                             | 0                        | 0                     | 0                                 | 0                   | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                             | 5,102                    | 0                     | 0                                 | 0                   | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                             | 6,312                    | 0                     | 0                                 | 0                   | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                               |                          |                       |                                   |                     |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                             | 124,427                  | 0                     | 0                                 | 0                   | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                             | 28,577                   | 0                     | 0                                 | 0                   | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                             | 0                        | 0                     | 0                                 | 0                   | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                             | 0                        | 0                     | 0                                 | 0                   | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                             | 0                        | 0                     | 0                                 | 0                   | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                               |                          |                       |                                   |                     |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                             | 0                        | 0                     | 0                                 | 0                   | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                             | 0                        | 0                     | 0                                 | 0                   | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                             | 0                        | 0                     | 0                                 | 0                   | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                               |                          |                       |                                   |                     |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                             | 9,911                    | 0                     | 0                                 | 0                   | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                             | 0                        | 0                     | 0                                 | 0                   | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                             | 3,423                    | 0                     | 0                                 | 0                   | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                             | 0                        | 0                     | 0                                 | 0                   | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                             | 473                      | 0                     | 0                                 | 0                   | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                             | 0                        | 0                     | 0                                 | 0                   | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                             | 0                        | 0                     | 0                                 | 0                   | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 431,211                       | 986,601                  | 173,609               | 89,550                            | 1,017,024           | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                               |                          |                       |                                   |                     |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                             | 0                        | 0                     | 0                                 | 0                   | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                             | 0                        | 0                     | 0                                 | 0                   | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                             | 0                        | 0                     | 0                                 | 0                   | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                             | 0                        | 0                     | 0                                 | 0                   | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                             | 0                        | 0                     | 0                                 | 0                   | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                             | 0                        | 0                     | 0                                 | 0                   | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                             | 0                        | 0                     | 0                                 | 0                   | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                             | 0                        | 0                     | 0                                 | 0                   | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                             | 0                        | 0                     | 0                                 | 0                   | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 0                             | 0                        | 0                     | 0                                 | 0                   | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 0                             | 0                        | 0                     | 0                                 | 0                   | 194.03 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
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11/24/2019 4:22 pm

| Cost Center Description |       |                                   | PARAMED<br>MEDICAL<br>PHYSICS | PARAMED<br>PASTORAL CARE | PARAMED<br>TECHNOLOGY | PARAMED<br>VASCULAR<br>ULTRASOUND | PARAMED<br>PHARMACY |        |
|-------------------------|-------|-----------------------------------|-------------------------------|--------------------------|-----------------------|-----------------------------------|---------------------|--------|
|                         |       |                                   | 23.05                         | 23.06                    | 23.07                 | 23.08                             | 23.09               |        |
| 194.04                  | 07954 | CON - GNE                         | 0                             | 0                        | 0                     | 0                                 | 0                   | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            | 0                             | 0                        | 0                     | 0                                 | 0                   | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                             | 0                        | 0                     | 0                                 | 0                   | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 431,211                       | 986,601                  | 173,609               | 89,550                            | 1,017,024           | 202.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

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From 07/01/2018  
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Part I  
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11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | PARAMED<br>RESPIRATORY<br>THERAPY | PARAMED<br>PHYSICIANS<br>ASSISTANT | Subtotal | Intern &<br>Residents Cost<br>& Post<br>Stepdown<br>Adjustments | Total |       |
|------------------------------|-------|--------------------------------------|-----------------------------------|------------------------------------|----------|-----------------------------------------------------------------|-------|-------|
|                              |       |                                      | 23.10                             | 23.11                              | 24.00    | 25.00                                                           | 26.00 |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                   |                                    |          |                                                                 |       |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                   |                                    |          |                                                                 |       | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                   |                                    |          |                                                                 |       | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                   |                                    |          |                                                                 |       | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                   |                                    |          |                                                                 |       | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                   |                                    |          |                                                                 |       | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                   |                                    |          |                                                                 |       | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                   |                                    |          |                                                                 |       | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                   |                                    |          |                                                                 |       | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                   |                                    |          |                                                                 |       | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                   |                                    |          |                                                                 |       | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                                   |                                    |          |                                                                 |       | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                                   |                                    |          |                                                                 |       | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                                   |                                    |          |                                                                 |       | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                                   |                                    |          |                                                                 |       | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                                   |                                    |          |                                                                 |       | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                                   |                                    |          |                                                                 |       | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                                   |                                    |          |                                                                 |       | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                                   |                                    |          |                                                                 |       | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                   |                                    |          |                                                                 |       | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                   |                                    |          |                                                                 |       | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                                   |                                    |          |                                                                 |       | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                                   |                                    |          |                                                                 |       | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                                   |                                    |          |                                                                 |       | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                                   |                                    |          |                                                                 |       | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                                   |                                    |          |                                                                 |       | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                                   |                                    |          |                                                                 |       | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                                   |                                    |          |                                                                 |       | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                                   |                                    |          |                                                                 |       | 4.00  |
| 5.01                         | 00500 | TRANSITION RECRUITMENT               |                                   |                                    |          |                                                                 |       | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                                   |                                    |          |                                                                 |       | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                                   |                                    |          |                                                                 |       | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                                   |                                    |          |                                                                 |       | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                                   |                                    |          |                                                                 |       | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                                   |                                    |          |                                                                 |       | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                                   |                                    |          |                                                                 |       | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                                   |                                    |          |                                                                 |       | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                                   |                                    |          |                                                                 |       | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                                   |                                    |          |                                                                 |       | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                                   |                                    |          |                                                                 |       | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                                   |                                    |          |                                                                 |       | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                                   |                                    |          |                                                                 |       | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                                   |                                    |          |                                                                 |       | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                                   |                                    |          |                                                                 |       | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                                   |                                    |          |                                                                 |       | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                                   |                                    |          |                                                                 |       | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                                   |                                    |          |                                                                 |       | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                                   |                                    |          |                                                                 |       | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                                   |                                    |          |                                                                 |       | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                                   |                                    |          |                                                                 |       | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                                   |                                    |          |                                                                 |       | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                                   |                                    |          |                                                                 |       | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                                   |                                    |          |                                                                 |       | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               |                                   |                                    |          |                                                                 |       | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                                   |                                    |          |                                                                 |       | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              |                                   |                                    |          |                                                                 |       | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             |                                   |                                    |          |                                                                 |       | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              |                                   |                                    |          |                                                                 |       | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              |                                   |                                    |          |                                                                 |       | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             |                                   |                                    |          |                                                                 |       | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              |                                   |                                    |          |                                                                 |       | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              |                                   |                                    |          |                                                                 |       | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             |                                   |                                    |          |                                                                 |       | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          |                                   |                                    |          |                                                                 |       | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 |                                   |                                    |          |                                                                 |       | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            |                                   |                                    |          |                                                                 |       | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       |                                   |                                    |          |                                                                 |       | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD |                                   |                                    |          |                                                                 |       | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD |                                   |                                    |          |                                                                 |       | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     |                                   |                                    |          |                                                                 |       | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       |                                   |                                    |          |                                                                 |       | 23.01 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PARAMED<br>RESPIRATORY<br>THERAPY | PARAMED<br>PHYSICIANS<br>ASSISTANT | Subtotal      | Intern &<br>Residents Cost<br>& Post<br>Stepdown<br>Adjustments | Total         |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------------|------------------------------------|---------------|-----------------------------------------------------------------|---------------|--------|
|                                        |       |                                        | 23.10                             | 23.11                              | 24.00         | 25.00                                                           | 26.00         |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        |                                   |                                    |               |                                                                 |               | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         |                                   |                                    |               |                                                                 |               | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           |                                   |                                    |               |                                                                 |               | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                |                                   |                                    |               |                                                                 |               | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  |                                   |                                    |               |                                                                 |               | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     |                                   |                                    |               |                                                                 |               | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            |                                   |                                    |               |                                                                 |               | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       |                                   |                                    |               |                                                                 |               | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 563,638                           |                                    |               |                                                                 |               | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           |                                   | 202,502                            |               |                                                                 |               | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                   |                                    |               |                                                                 |               |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                 | 31,404                             | 160,146,714   | -14,110,235                                                     | 146,036,479   | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                 | 7,441                              | 35,402,864    | -2,063,150                                                      | 33,339,714    | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                                 | 8,472                              | 40,969,899    | -4,477,822                                                      | 36,492,077    | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                 | 2,487                              | 11,670,622    | -714,546                                                        | 10,956,076    | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                 | 5,486                              | 26,506,130    | -885,380                                                        | 25,620,750    | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                 | 2,459                              | 12,410,157    | -1,153,129                                                      | 11,257,028    | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                 | 2,301                              | 11,359,143    | -555,211                                                        | 10,803,932    | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                 | 0                                  | 6,566,724     | -164,263                                                        | 6,402,461     | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                   |                                    |               |                                                                 |               |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                                 | 38,027                             | 67,328,037    | -5,703,228                                                      | 61,624,809    | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                 | 2,722                              | 12,540,024    | 0                                                               | 12,540,024    | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                 | 2,732                              | 12,978,020    | -755,612                                                        | 12,222,408    | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                                 | 3,337                              | 18,135,151    | -5,282,714                                                      | 12,852,437    | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                 | 11,643                             | 53,199,405    | -6,872,784                                                      | 46,326,621    | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                 | 3,579                              | 16,927,398    | -1,010,221                                                      | 15,917,177    | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                 | 1,320                              | 6,512,714     | -765,468                                                        | 5,747,246     | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                                 | 21,323                             | 99,338,085    | -2,682,423                                                      | 96,655,662    | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                 | 580                                | 2,283,770     | 0                                                               | 2,283,770     | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                 | 0                                  | 0             | 0                                                               | 0             | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                 | 3,569                              | 14,889,567    | -251,323                                                        | 14,638,244    | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                 | 0                                  | 1,647,603     | 0                                                               | 1,647,603     | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 563,638                           | 3,480                              | 15,583,336    | -619,273                                                        | 14,964,063    | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                 | 2,028                              | 8,415,104     | 0                                                               | 8,415,104     | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                 | 1,581                              | 6,503,672     | 0                                                               | 6,503,672     | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                 | 1,165                              | 4,615,811     | 0                                                               | 4,615,811     | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                 | 8,165                              | 15,401,584    | -1,036,503                                                      | 14,365,081    | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                 | 573                                | 3,222,739     | 0                                                               | 3,222,739     | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                 | 0                                  | 42,332,485    | 0                                                               | 42,332,485    | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                 | 0                                  | 92,582,000    | 0                                                               | 92,582,000    | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                 | 0                                  | 202,519,278   | 0                                                               | 202,519,278   | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                 | 0                                  | 0             | 0                                                               | 0             | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                 | 1,049                              | 5,517,997     | -1,166,271                                                      | 4,351,726     | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                 | 1,297                              | 7,106,795     | -2,411,388                                                      | 4,695,407     | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                   |                                    |               |                                                                 |               |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                                 | 25,572                             | 113,340,020   | -9,509,213                                                      | 103,830,807   | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                 | 5,873                              | 39,054,333    | -4,482,751                                                      | 34,571,582    | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                 | 0                                  | 0             | 0                                                               | 0             | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                 | 0                                  | 0             | 0                                                               | 0             | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                 | 0                                  | 0             | 0                                                               | 0             | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                   |                                    |               |                                                                 |               |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                 | 0                                  | 0             | 0                                                               | 0             | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                 | 0                                  | 0             | 0                                                               | 0             | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                 | 0                                  | 0             | 0                                                               | 0             | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                   |                                    |               |                                                                 |               |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                                 | 2,037                              | 7,906,505     | -165,906                                                        | 7,740,599     | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                 | 0                                  | 0             | 0                                                               | 0             | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                                 | 703                                | 2,497,891     | 0                                                               | 2,497,891     | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                 | 0                                  | 0             | 0                                                               | 0             | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                 | 97                                 | 344,963       | 0                                                               | 344,963       | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                 | 0                                  | 0             | 0                                                               | 0             | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                 | 0                                  | 0             | 0                                                               | 0             | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 563,638                           | 202,502                            | 1,177,756,540 | -66,838,814                                                     | 1,110,917,726 | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                   |                                    |               |                                                                 |               |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                 | 0                                  | 12,155,773    | 0                                                               | 12,155,773    | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                 | 0                                  | 12,548,131    | 0                                                               | 12,548,131    | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                 | 0                                  | 2,700,363     | 0                                                               | 2,700,363     | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                                 | 0                                  | 77,110,278    | 0                                                               | 77,110,278    | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                                 | 0                                  | 51,072,657    | 0                                                               | 51,072,657    | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                                 | 0                                  | 36,326,757    | -4,274,136                                                      | 32,052,621    | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                                 | 0                                  | 357,909,237   | -4,242,926                                                      | 353,666,311   | 192.00 |

## COST ALLOCATION - GENERAL SERVICE COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | PARAMED<br>RESPIRATORY<br>THERAPY | PARAMED<br>PHYSICIANS<br>ASSISTANT | Subtotal      | Intern &<br>Residents Cost<br>& Post<br>Stepdown<br>Adjustments | Total         |        |
|-------------------------|-------|-----------------------------------|-----------------------------------|------------------------------------|---------------|-----------------------------------------------------------------|---------------|--------|
|                         |       |                                   | 23.10                             | 23.11                              | 24.00         | 25.00                                                           | 26.00         |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                   | 0                                 | 0                                  | 38,209,247    | -13,141                                                         | 38,196,106    | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           | 0                                 | 0                                  | 63,796,767    | 0                                                               | 63,796,767    | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                                 | 0                                  | 4,591,160     | 0                                                               | 4,591,160     | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                                 | 0                                  | 41,397,787    | 0                                                               | 41,397,787    | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                                 | 0                                  | 234,830       | 0                                                               | 234,830       | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            | 0                                 | 0                                  | 0             | 0                                                               | 0             | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                                 | 0                                  | -1,873,242    | 0                                                               | -1,873,242    | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 563,638                           | 202,502                            | 1,873,936,285 | -75,369,017                                                     | 1,798,567,268 | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | Directly<br>Assigned New<br>Capital<br>Related Costs | CAPITAL RELATED COSTS |                              |                             |                             |       |
|------------------------------|-------|------------------------------------------------------|-----------------------|------------------------------|-----------------------------|-----------------------------|-------|
|                              |       |                                                      | BLDG & FIXT           | DEPRECIATION<br>OLD HOSPITAL | DEPRECIATION<br>DIRECT BLDG | DEPRECIATION<br>KELLOGG PAV |       |
|                              |       | 0                                                    | 1.00                  | 1.01                         | 1.02                        | 1.03                        |       |
| GENERAL SERVICE COST CENTERS |       |                                                      |                       |                              |                             |                             |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT                            |                       |                              |                             |                             | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL                            |                       |                              |                             |                             | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG                             |                       |                              |                             |                             | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV                             |                       |                              |                             |                             | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH                             |                       |                              |                             |                             | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV                              |                       |                              |                             |                             | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH                          |                       |                              |                             |                             | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH                          |                       |                              |                             |                             | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                                 |                       |                              |                             |                             | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY                       |                       |                              |                             |                             | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III                            |                       |                              |                             |                             | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                                     |                       |                              |                             |                             | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                                     |                       |                              |                             |                             | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT                               |                       |                              |                             |                             | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS                             |                       |                              |                             |                             | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                                 |                       |                              |                             |                             | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                                    |                       |                              |                             |                             | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                                   |                       |                              |                             |                             | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP                            |                       |                              |                             |                             | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                                     |                       |                              |                             |                             | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                                 |                       |                              |                             |                             | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                                   |                       |                              |                             |                             | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH                              |                       |                              |                             |                             | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                                         |                       |                              |                             |                             | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                                |                       |                              |                             |                             | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                                       |                       |                              |                             |                             | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH                              |                       |                              |                             |                             | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT                         | 0                     | 0                            | 0                           | 0                           | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT                               | 0                     | 0                            | 0                           | 0                           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                                       | 0                     | 0                            | 0                           | 4,410,694                   | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION                              | 0                     | 0                            | 0                           | 0                           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE                             | 0                     | 0                            | 0                           | 0                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE                            | 0                     | 0                            | 0                           | 0                           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB                               | 0                     | 0                            | 0                           | 0                           | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE                               | 0                     | 14,677                       | 0                           | 121,773                     | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                                 | 0                     | 0                            | 0                           | 0                           | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                                     | 0                     | 0                            | 0                           | 1,430                       | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                                         | 0                     | 2,303                        | 0                           | 0                           | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION                             | 0                     | 3,892                        | 453,982                     | 19,577                      | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                                | 0                     | 502,210                      | 0                           | 859,327                     | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                                   | 0                     | 0                            | 0                           | 0                           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE                              | 0                     | 11,739                       | 0                           | 5,834                       | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                                         | 0                     | 6,306                        | 0                           | 219,911                     | 9.00  |
| 10.00                        | 01000 | DIETARY                                              | 0                     | 0                            | 0                           | 0                           | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                                 | 0                     | 0                            | 0                           | 11,114                      | 10.01 |
| 11.00                        | 01100 | CAFETERIA                                            | 0                     | 0                            | 0                           | 0                           | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION                               | 0                     | 20,205                       | 0                           | 138,629                     | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY                            | 0                     | 0                            | 0                           | 0                           | 14.00 |
| 15.00                        | 01500 | PHARMACY                                             | 0                     | 47,130                       | 0                           | 11,852                      | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY                            | 0                     | 10,563                       | 0                           | 0                           | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY                            | 0                     | 20,920                       | 0                           | 8,762                       | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED                               | 0                     | 0                            | 0                           | 0                           | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED                               | 0                     | 4,209                        | 0                           | 0                           | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                                | 0                     | 62,522                       | 0                           | 31,752                      | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG                              | 0                     | 0                            | 0                           | 0                           | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH                             | 0                     | 0                            | 0                           | 0                           | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH                              | 0                     | 0                            | 0                           | 0                           | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD                              | 0                     | 0                            | 0                           | 0                           | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT                             | 0                     | 0                            | 0                           | 0                           | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR                              | 0                     | 0                            | 0                           | 0                           | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS                              | 0                     | 0                            | 0                           | 0                           | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS                             | 0                     | 33,612                       | 0                           | 10,146                      | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT                          | 0                     | 0                            | 0                           | 385,288                     | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                                 | 0                     | 0                            | 0                           | 0                           | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS                            | 0                     | 0                            | 0                           | 0                           | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                                       | 0                     | 0                            | 0                           | 0                           | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD                 | 0                     | 0                            | 0                           | 245,414                     | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD                 | 0                     | 49,782                       | 0                           | 110,820                     | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT                     | 0                     | 0                            | 0                           | 0                           | 23.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | Directly Assigned New Capital Related Costs | CAPITAL RELATED COSTS |                           |                          |                          |        |
|----------------------------------------|-------|----------------------------------------|---------------------------------------------|-----------------------|---------------------------|--------------------------|--------------------------|--------|
|                                        |       |                                        |                                             | BLDG & FIXT           | DEPRECIATION OLD HOSPITAL | DEPRECIATION DIRECT BLDG | DEPRECIATION KELLOGG PAV |        |
|                                        |       |                                        |                                             | 1.00                  | 1.01                      | 1.02                     | 1.03                     |        |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 0                                           | 0                     | 0                         | 0                        | 0                        | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                                           | 0                     | 0                         | 0                        | 0                        | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                                           | 0                     | 0                         | 0                        | 0                        | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                                           | 0                     | 0                         | 0                        | 0                        | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                                           | 0                     | 0                         | 0                        | 0                        | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                                           | 0                     | 0                         | 0                        | 22,436                   | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                                           | 0                     | 0                         | 0                        | 0                        | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                                           | 0                     | 0                         | 0                        | 0                        | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                                           | 0                     | 0                         | 0                        | 0                        | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                                           | 0                     | 0                         | 0                        | 0                        | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                                           | 0                     | 0                         | 0                        | 0                        | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                             |                       |                           |                          |                          |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                           | 0                     | 62,982                    | 0                        | 580,641                  | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                           | 0                     | 0                         | 0                        | 0                        | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                                           | 0                     | 0                         | 0                        | 0                        | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                           | 0                     | 0                         | 0                        | 270,432                  | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                           | 0                     | 0                         | 0                        | 0                        | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                           | 0                     | 0                         | 0                        | 428,154                  | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                           | 0                     | 0                         | 0                        | 0                        | 41.00  |
| 43.00                                  | 04300 | NURSEY                                 | 0                                           | 0                     | 0                         | 0                        | 0                        | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                             |                       |                           |                          |                          |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                                           | 0                     | 0                         | 0                        | 0                        | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                           | 0                     | 0                         | 0                        | 0                        | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                           | 0                     | 0                         | 0                        | 0                        | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                                           | 0                     | 0                         | 0                        | 0                        | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                           | 0                     | 28,942                    | 0                        | 72,704                   | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                           | 0                     | 0                         | 0                        | 86,240                   | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                           | 0                     | 0                         | 0                        | 0                        | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                                           | 0                     | 3,860                     | 0                        | 39,592                   | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                           | 0                     | 0                         | 0                        | 0                        | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                           | 0                     | 0                         | 0                        | 0                        | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                           | 0                     | 0                         | 0                        | 0                        | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                           | 0                     | 0                         | 0                        | 0                        | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                           | 0                     | 0                         | 0                        | 24,166                   | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                           | 0                     | 28,433                    | 0                        | 5,672                    | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                           | 0                     | 22,445                    | 0                        | 33,343                   | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                           | 0                     | 0                         | 0                        | 0                        | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                           | 0                     | 0                         | 0                        | 71,344                   | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                           | 0                     | 0                         | 0                        | 0                        | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                           | 0                     | 0                         | 0                        | 0                        | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                           | 0                     | 0                         | 0                        | 0                        | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                           | 0                     | 0                         | 0                        | 0                        | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                           | 0                     | 0                         | 0                        | 0                        | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                           | 0                     | 0                         | 0                        | 30,299                   | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                           | 0                     | 0                         | 0                        | 0                        | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                             |                       |                           |                          |                          |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                                           | 0                     | 0                         | 0                        | 43,074                   | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                           | 0                     | 0                         | 0                        | 284,590                  | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                           | 0                     | 0                         | 0                        | 0                        | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                           | 0                     | 0                         | 0                        | 0                        | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                           | 0                     | 0                         | 0                        | 0                        | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                             |                       |                           |                          |                          |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                           | 0                     | 0                         | 0                        | 0                        | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                           | 0                     | 0                         | 0                        | 0                        | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                           | 0                     | 0                         | 0                        | 0                        | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                             |                       |                           |                          |                          |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                                           | 0                     | 0                         | 0                        | 0                        | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                           | 0                     | 0                         | 0                        | 0                        | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                                           | 0                     | 0                         | 0                        | 0                        | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                           | 0                     | 0                         | 0                        | 0                        | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                           | 0                     | 0                         | 0                        | 0                        | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                           | 0                     | 0                         | 0                        | 0                        | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                           | 0                     | 0                         | 0                        | 0                        | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                                           | 0                     | 936,732                   | 4,864,676                | 4,174,316                | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                             |                       |                           |                          |                          |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                           | 0                     | 0                         | 77,036                   | 0                        | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                           | 0                     | 0                         | 0                        | 0                        | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                           | 0                     | 0                         | 0                        | 0                        | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                                           | 0                     | 0                         | 1,402,208                | 3,482                    | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                                           | 0                     | 0                         | 0                        | 0                        | 191.01 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | Directly<br>Assigned New<br>Capital<br>Related Costs | CAPITAL RELATED COSTS |                              |                             |                             |        |
|-------------------------|-------|-----------------------------------|------------------------------------------------------|-----------------------|------------------------------|-----------------------------|-----------------------------|--------|
|                         |       |                                   |                                                      | BLDG & FIXT           | DEPRECIATION<br>OLD HOSPITAL | DEPRECIATION<br>DIRECT BLDG | DEPRECIATION<br>KELLOGG PAV |        |
|                         |       |                                   |                                                      | 1.00                  | 1.01                         | 1.02                        | 1.03                        |        |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH    | 0                                                    | 0                     | 0                            | 0                           | 10,907                      | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES       | 0                                                    | 0                     | 249,849                      | 0                           | 481,442                     | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                   | 0                                                    | 0                     | 13,454                       | 0                           | 26,056                      | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           | 0                                                    | 0                     | 19,093                       | 0                           | 0                           | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                                                    | 0                     | 0                            | 0                           | 0                           | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                                                    | 0                     | 0                            | 0                           | 0                           | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                                                    | 0                     | 0                            | 0                           | 0                           | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                                                      |                       |                              |                             |                             | 200.00 |
| 201.00                  |       | Negative Cost Centers             |                                                      | 0                     | 0                            | 0                           | 0                           | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 0                                                    | 0                     | 1,219,128                    | 6,343,920                   | 4,696,203                   | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS       |                            |                                |                                |                         |       |
|------------------------------|-------|--------------------------------------|-----------------------------|----------------------------|--------------------------------|--------------------------------|-------------------------|-------|
|                              |       |                                      | DEPRECIATION<br>JELKE SOUTH | DEPRECIATION<br>ATRIUM PAV | DEPRECIATION<br>PRO BLDG NORTH | DEPRECIATION<br>PRO BLDG SOUTH | DEPRECIATION<br>WOOD ST |       |
|                              |       |                                      | 1.04                        | 1.05                       | 1.06                           | 1.07                           | 1.08                    |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                             |                            |                                |                                |                         |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                             |                            |                                |                                |                         | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                             |                            |                                |                                |                         | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                             |                            |                                |                                |                         | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                             |                            |                                |                                |                         | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                             |                            |                                |                                |                         | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                             |                            |                                |                                |                         | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                             |                            |                                |                                |                         | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                             |                            |                                |                                |                         | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                             |                            |                                |                                |                         | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                             |                            |                                |                                |                         | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                             |                            |                                |                                |                         | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                             |                            |                                |                                |                         | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                             |                            |                                |                                |                         | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                             |                            |                                |                                |                         | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                             |                            |                                |                                |                         | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                             |                            |                                |                                |                         | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                             |                            |                                |                                |                         | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                             |                            |                                |                                |                         | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                             |                            |                                |                                |                         | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                             |                            |                                |                                |                         | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                             |                            |                                |                                |                         | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                             |                            |                                |                                |                         | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                             |                            |                                |                                |                         | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                             |                            |                                |                                |                         | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                             |                            |                                |                                |                         | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                             |                            |                                |                                |                         | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                             |                            |                                |                                |                         | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                           | 59,819                     | 0                              | 0                              | 0                       | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                           | 0                          | 0                              | 0                              | 0                       | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0                           | 0                          | 3,163                          | 0                              | 0                       | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 17,711                      | 0                          | 118                            | 0                              | 0                       | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                           | 19,663                     | 0                              | 0                              | 0                       | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                           | 63,558                     | 95                             | 0                              | 0                       | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 92,308                      | 0                          | 0                              | 0                              | 0                       | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 144,259                     | 140,409                    | 3,731                          | 8,726                          | 0                       | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 73,623                      | 0                          | 0                              | 0                              | 0                       | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 7,404                       | 0                          | 292                            | 1,964                          | 0                       | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 152,555                     | 0                          | 0                              | 0                              | 0                       | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 41,602                      | 74,335                     | 39                             | 0                              | 109,232                 | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 1,636,417                   | 1,750,053                  | 138,343                        | 186,565                        | 60,416                  | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                           | 0                          | 0                              | 0                              | 0                       | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 3,733                       | 19,178                     | 0                              | 0                              | 0                       | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 7,715                       | 72,258                     | 1,617                          | 2,544                          | 1,528                   | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                           | 0                          | 0                              | 0                              | 0                       | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                           | 498,100                    | 0                              | 0                              | 0                       | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 36,355                      | 117,999                    | 2,666                          | 0                              | 0                       | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 30,341                      | 0                          | 0                              | 0                              | 0                       | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                           | 109,253                    | 0                              | 0                              | 0                       | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                           | 254,992                    | 434                            | 0                              | 0                       | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                           | 0                          | 0                              | 0                              | 0                       | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                           | 34,064                     | 434                            | 0                              | 0                       | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                           | 0                          | 0                              | 0                              | 0                       | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                           | 0                          | 0                              | 0                              | 0                       | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                           | 0                          | 7,060                          | 0                              | 0                       | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 49,089                      | 25,109                     | 3,589                          | 0                              | 0                       | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                           | 0                          | 0                              | 0                              | 0                       | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 279,393                     | 0                          | 0                              | 0                              | 0                       | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                           | 0                          | 0                              | 0                              | 0                       | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                           | 0                          | 0                              | 0                              | 0                       | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                           | 0                          | 2,311                          | 1,883                          | 0                       | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 21,651                      | 0                          | 0                              | 0                              | 0                       | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 23,642                      | 0                          | 0                              | 0                              | 0                       | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                           | 0                          | 8,094                          | 706                            | 0                       | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                           | 11,078                     | 0                              | 0                              | 0                       | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                           | 0                          | 0                              | 0                              | 0                       | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                           | 0                          | 0                              | 0                              | 0                       | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                           | 34,548                     | 0                              | 0                              | 0                       | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 54,025                      | 0                          | 2,698                          | 9,785                          | 0                       | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                           | 0                          | 1,767                          | 0                              | 0                       | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                           | 0                          | 0                              | 0                              | 0                       | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                           | 0                          | 0                              | 0                              | 0                       | 23.02 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS       |                            |                                |                                |                         |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------|----------------------------|--------------------------------|--------------------------------|-------------------------|--------|
|                                        |       |                                        | DEPRECIATION<br>JELKE SOUTH | DEPRECIATION<br>ATRIUM PAV | DEPRECIATION<br>PRO BLDG NORTH | DEPRECIATION<br>PRO BLDG SOUTH | DEPRECIATION<br>WOOD ST |        |
|                                        |       |                                        | 1.04                        | 1.05                       | 1.06                           | 1.07                           | 1.08                    |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                           | 0                          | 4,962                          | 0                              | 0                       | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                           | 0                          | 1,736                          | 0                              | 0                       | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                           | 12,578                     | 0                              | 0                              | 0                       | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                           | 4,870                      | 0                              | 0                              | 0                       | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                           | 0                          | 0                              | 0                              | 0                       | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                           | 0                          | 0                              | 0                              | 0                       | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                           | 3,739                      | 0                              | 0                              | 0                       | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                           | 0                          | 0                              | 0                              | 0                       | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                           | 0                          | 0                              | 0                              | 0                       | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                             |                            |                                |                                |                         |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                           | 1,862,535                  | 0                              | 0                              | 0                       | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                           | 0                          | 0                              | 0                              | 0                       | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                           | 0                          | 0                              | 0                              | 0                       | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                           | 28,132                     | 0                              | 0                              | 0                       | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                           | 0                          | 0                              | 0                              | 0                       | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                           | 0                          | 0                              | 0                              | 0                       | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                           | 0                          | 0                              | 0                              | 0                       | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                           | 339,182                    | 0                              | 0                              | 0                       | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                             |                            |                                |                                |                         |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 79,326                      | 424,018                    | 0                              | 0                              | 0                       | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                           | 177,034                    | 0                              | 0                              | 0                       | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                           | 0                          | 0                              | 0                              | 0                       | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 145,856                     | 33,487                     | 0                              | 0                              | 0                       | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 156,848                     | 0                          | 63,646                         | 25,011                         | 0                       | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 9,934                       | 408,509                    | 0                              | 0                              | 0                       | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                           | 0                          | 0                              | 0                              | 0                       | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 644,687                     | 707,189                    | 66,627                         | 46,438                         | 0                       | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 29,885                      | 0                          | 0                              | 0                              | 0                       | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                           | 0                          | 0                              | 0                              | 0                       | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 32,622                      | 0                          | 0                              | 4,843                          | 0                       | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                           | 0                          | 0                              | 0                              | 0                       | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                           | 20,655                     | 0                              | 0                              | 0                       | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                           | 17,516                     | 0                              | 11,044                         | 0                       | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                           | 0                          | 0                              | 27,202                         | 0                       | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                           | 0                          | 0                              | 0                              | 0                       | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                           | 28,756                     | 0                              | 0                              | 0                       | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                           | 0                          | 0                              | 0                              | 0                       | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                           | 0                          | 0                              | 0                              | 0                       | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                           | 0                          | 0                              | 0                              | 0                       | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                           | 0                          | 0                              | 0                              | 0                       | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                           | 0                          | 0                              | 0                              | 0                       | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                           | 17,678                     | 0                              | 0                              | 0                       | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                           | 0                          | 0                              | 9,333                          | 0                       | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                             |                            |                                |                                |                         |        |
| 90.00                                  | 09000 | CLINIC                                 | 10,763                      | 0                          | 301,480                        | 170,986                        | 22,690                  | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                           | 0                          | 0                              | 0                              | 0                       | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                           | 0                          | 0                              | 0                              | 0                       | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                           | 0                          | 0                              | 0                              | 0                       | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                           | 0                          | 0                              | 0                              | 0                       | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                             |                            |                                |                                |                         |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                           | 0                          | 0                              | 0                              | 0                       | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                           | 0                          | 0                              | 0                              | 0                       | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                           | 0                          | 0                              | 0                              | 0                       | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                             |                            |                                |                                |                         |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                           | 0                          | 0                              | 0                              | 0                       | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                           | 0                          | 0                              | 0                              | 0                       | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                           | 0                          | 0                              | 0                              | 0                       | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                           | 0                          | 0                              | 0                              | 0                       | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                           | 0                          | 0                              | 0                              | 0                       | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                           | 0                          | 0                              | 0                              | 0                       | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                           | 0                          | 0                              | 0                              | 0                       | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 3,781,744                   | 7,370,294                  | 614,902                        | 507,030                        | 193,866                 | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                             |                            |                                |                                |                         |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                           | 45,764                     | 11,084                         | 18,910                         | 0                       | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                           | 0                          | 0                              | 0                              | 0                       | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                           | 0                          | 0                              | 0                              | 0                       | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 1,283,919                   | 0                          | 757                            | 14,710                         | 0                       | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 16,736                      | 0                          | 1,830                          | 22,495                         | 0                       | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 175,139                     | 0                          | 1,104                          | 16,991                         | 0                       | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 194,115                     | 61,758                     | 526,450                        | 207,159                        | 152,347                 | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 45,065                      | 0                          | 0                              | 0                              | 0                       | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                           | 0                          | 37,960                         | 0                              | 0                       | 194.01 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | CAPITAL RELATED COSTS       |                            |                                |                                |                         |        |
|-------------------------|-------|-----------------------------------|-----------------------------|----------------------------|--------------------------------|--------------------------------|-------------------------|--------|
|                         |       |                                   | DEPRECIATION<br>JELKE SOUTH | DEPRECIATION<br>ATRIUM PAV | DEPRECIATION<br>PRO BLDG NORTH | DEPRECIATION<br>PRO BLDG SOUTH | DEPRECIATION<br>WOOD ST |        |
|                         |       |                                   | 1.04                        | 1.05                       | 1.06                           | 1.07                           | 1.08                    |        |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                           | 0                          | 141,499                        | 79,532                         | 0                       | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                           | 0                          | 0                              | 0                              | 0                       | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                           | 0                          | 0                              | 0                              | 0                       | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                             |                            |                                |                                |                         | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                           | 0                          | 0                              | 0                              | 0                       | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 5,496,718                   | 7,477,816                  | 1,335,586                      | 866,827                        | 346,213                 | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                              | CAPITAL RELATED COSTS                |                              |                     |                     |                           |           |       |
|-------------------------|------------------------------|--------------------------------------|------------------------------|---------------------|---------------------|---------------------------|-----------|-------|
|                         |                              | DEPRECIATION<br>ACADEMIC<br>FACILITY | DEPRECIATION<br>PRO BLDG III | DEPRECIATION<br>JRB | DEPRECIATION<br>TOB | DEPRECIATION<br>EQUIPMENT |           |       |
|                         |                              | 1.09                                 | 1.10                         | 1.11                | 1.12                | 1.13                      |           |       |
|                         | GENERAL SERVICE COST CENTERS |                                      |                              |                     |                     |                           |           |       |
| 1.00                    | 00100                        | CAP REL COSTS-BLDG & FIXT            |                              |                     |                     |                           | 1.00      |       |
| 1.01                    | 00101                        | DEPRECIATION OLD HOSPITAL            |                              |                     |                     |                           | 1.01      |       |
| 1.02                    | 00102                        | DEPRECIATION DIRECT BLDG             |                              |                     |                     |                           | 1.02      |       |
| 1.03                    | 00103                        | DEPRECIATION KELLOGG PAV             |                              |                     |                     |                           | 1.03      |       |
| 1.04                    | 00104                        | DEPRECIATION JELKE SOUTH             |                              |                     |                     |                           | 1.04      |       |
| 1.05                    | 00105                        | DEPRECIATION ATRIUM PAV              |                              |                     |                     |                           | 1.05      |       |
| 1.06                    | 00106                        | DEPRECIATION PRO BLDG NORTH          |                              |                     |                     |                           | 1.06      |       |
| 1.07                    | 00107                        | DEPRECIATION PRO BLDG SOUTH          |                              |                     |                     |                           | 1.07      |       |
| 1.08                    | 00108                        | DEPRECIATION WOOD ST                 |                              |                     |                     |                           | 1.08      |       |
| 1.09                    | 00109                        | DEPRECIATION ACADEMIC FACILITY       |                              |                     |                     |                           | 1.09      |       |
| 1.10                    | 00110                        | DEPRECIATION PRO BLDG III            |                              |                     |                     |                           | 1.10      |       |
| 1.11                    | 00111                        | DEPRECIATION JRB                     |                              |                     |                     |                           | 1.11      |       |
| 1.12                    | 00112                        | DEPRECIATION TOB                     |                              |                     |                     |                           | 1.12      |       |
| 1.13                    | 00113                        | DEPRECIATION EQUIPMENT               |                              |                     |                     |                           | 1.13      |       |
| 1.14                    | 00114                        | DEPRECIATION ORTHOPEDICS             |                              |                     |                     |                           | 1.14      |       |
| 1.15                    | 00115                        | DEPRECIATION KIDSTON                 |                              |                     |                     |                           | 1.15      |       |
| 1.16                    | 00116                        | DEPRECIATION COHN                    |                              |                     |                     |                           | 1.16      |       |
| 1.17                    | 00117                        | DEPRECIATION TOWER                   |                              |                     |                     |                           | 1.17      |       |
| 2.00                    | 00200                        | CAP REL COSTS-MVBLE EQUIP            |                              |                     |                     |                           | 2.00      |       |
| 2.01                    | 00201                        | INTEREST GENERAL                     |                              |                     |                     |                           | 2.01      |       |
| 2.02                    | 00202                        | INTEREST DIRECT BLDG                 |                              |                     |                     |                           | 2.02      |       |
| 2.03                    | 00203                        | INTEREST ATRUM PAV                   |                              |                     |                     |                           | 2.03      |       |
| 2.04                    | 00204                        | INTEREST PRO BLDG SOUTH              |                              |                     |                     |                           | 2.04      |       |
| 2.05                    | 00205                        | INTEREST TOB                         |                              |                     |                     |                           | 2.05      |       |
| 2.06                    | 00206                        | INTEREST PRO BLDG III                |                              |                     |                     |                           | 2.06      |       |
| 2.07                    | 00207                        | INTEREST TOWER                       |                              |                     |                     |                           | 2.07      |       |
| 2.08                    | 00208                        | INTEREST PRO BLDG NORTH              |                              |                     |                     |                           | 2.08      |       |
| 4.00                    | 00400                        | EMPLOYEE BENEFITS DEPARTMENT         | 370                          | 0                   | 0                   | 0                         | 297,310   | 4.00  |
| 5.01                    | 00590                        | TRANSITION RECRUITMENT               | 0                            | 0                   | 0                   | 0                         | 0         | 5.01  |
| 5.02                    | 00540                        | PARKING GARAGE                       | 0                            | 0                   | 0                   | 0                         | 10,867    | 5.02  |
| 5.03                    | 00591                        | RESEARCH ADMINISTRATION              | 466                          | 0                   | 0                   | 0                         | 85,251    | 5.03  |
| 5.04                    | 00592                        | ADMIN & GEN INPT SERVICE             | 0                            | 0                   | 0                   | 0                         | 68,075    | 5.04  |
| 5.05                    | 00593                        | ADMIN & GEN OUTPT SERVICE            | 0                            | 0                   | 0                   | 0                         | 71,611    | 5.05  |
| 5.06                    | 00594                        | ADMIN & GEN ANIMAL LAB               | 1,253                        | 0                   | 0                   | 0                         | 259,258   | 5.06  |
| 5.07                    | 00595                        | ADMIN & GEN PT SERVICE               | 4,267                        | 13,597              | 3,852               | 0                         | 1,847,472 | 5.07  |
| 5.08                    | 00596                        | PERSONNEL DEPARTMENT                 | 3,567                        | 0                   | 0                   | 0                         | 77,563    | 5.08  |
| 5.09                    | 00597                        | RESEARCH FACULTY                     | 0                            | 0                   | 0                   | 0                         | 18,539    | 5.09  |
| 5.10                    | 00598                        | RESEARCH SPA                         | 1,562                        | 0                   | 0                   | 0                         | 156,878   | 5.10  |
| 5.11                    | 00560                        | CORPORATE ADMINISTRATION             | 69,005                       | 57,476              | 26,036              | 0                         | 2,007,611 | 5.11  |
| 6.00                    | 00600                        | MAINTENANCE & REPAIRS                | 192,610                      | 275,967             | 66,312              | 0                         | 8,541,448 | 6.00  |
| 6.01                    | 00601                        | RENTED SPACE COSTS                   | 0                            | 0                   | 0                   | 0                         | 0         | 6.01  |
| 8.00                    | 00800                        | LAUNDRY & LINEN SERVICE              | 0                            | 0                   | 0                   | 0                         | 141,940   | 8.00  |
| 9.00                    | 00900                        | HOUSEKEEPING                         | 1,756                        | 19,319              | 12,790              | 0                         | 851,379   | 9.00  |
| 10.00                   | 01000                        | DIETARY                              | 0                            | 0                   | 0                   | 0                         | 76,606    | 10.00 |
| 10.01                   | 01001                        | PATIENT FOOD SERVICE                 | 0                            | 0                   | 1,682               | 0                         | 416,899   | 10.01 |
| 11.00                   | 01100                        | CAFETERIA                            | 68,279                       | 0                   | 0                   | 0                         | 611,164   | 11.00 |
| 13.00                   | 01300                        | NURSING ADMINISTRATION               | 8,158                        | 0                   | 6,832               | 0                         | 230,014   | 13.00 |
| 14.00                   | 01400                        | CENTRAL SERVICES & SUPPLY            | 0                            | 0                   | 4,546               | 0                         | 558,060   | 14.00 |
| 15.00                   | 01500                        | PHARMACY                             | 0                            | 0                   | 0                   | 0                         | 275,640   | 15.00 |
| 16.00                   | 01600                        | MEDICAL RECORDS & LIBRARY            | 3,610                        | 0                   | 0                   | 0                         | 198,661   | 16.00 |
| 16.01                   | 01601                        | MEDICAL RECORDS & LIBRARY            | 0                            | 0                   | 3,750               | 0                         | 173,017   | 16.01 |
| 18.00                   | 01850                        | CLINICAL LAB ADMIN MED               | 0                            | 0                   | 0                   | 0                         | 0         | 18.00 |
| 18.01                   | 01080                        | CLINICAL LAB ADMIN PED               | 327                          | 0                   | 0                   | 0                         | 6,131     | 18.01 |
| 18.02                   | 01851                        | CLINICAL LAB ADMIN OB                | 0                            | 0                   | 0                   | 0                         | 100,709   | 18.02 |
| 18.03                   | 01852                        | CLINICAL LAB ADMIN SURG              | 0                            | 3,677               | 0                   | 0                         | 83,224    | 18.03 |
| 18.04                   | 01853                        | CLINICAL LAB ADMIN PSYCH             | 0                            | 0                   | 0                   | 0                         | 77,239    | 18.04 |
| 18.05                   | 01854                        | CLINICAL LAB ADMIN PATH              | 0                            | 0                   | 0                   | 0                         | 218,514   | 18.05 |
| 18.06                   | 01855                        | CLINICAL LAB ADMIN CARD              | 0                            | 0                   | 0                   | 0                         | 0         | 18.06 |
| 18.07                   | 01856                        | CLINICAL LAB ADMIN HEMAT             | 0                            | 0                   | 0                   | 0                         | 0         | 18.07 |
| 18.08                   | 01857                        | CLINICAL LAB ADMIN NEUR              | 0                            | 0                   | 0                   | 0                         | 8,126     | 18.08 |
| 18.09                   | 01858                        | CLINICAL LAB ADMIN OCLS              | 0                            | 0                   | 0                   | 0                         | 16,934    | 18.09 |
| 18.12                   | 01859                        | DISCRETIONARY OPERATIONS             | 0                            | 0                   | 0                   | 0                         | 59,949    | 18.12 |
| 18.14                   | 01860                        | RUSH UNIVERSITY ADMIN SPLIT          | 226,571                      | 0                   | 0                   | 0                         | 1,688,307 | 18.14 |
| 18.16                   | 01861                        | NURSING SCHOOL SPLIT                 | 50,921                       | 0                   | 0                   | 0                         | 293,287   | 18.16 |
| 19.00                   | 01900                        | NONPHYSICIAN ANESTHETISTS            | 0                            | 0                   | 0                   | 0                         | 0         | 19.00 |
| 20.00                   | 02000                        | NURSING SCHOOL                       | 0                            | 0                   | 0                   | 0                         | 0         | 20.00 |
| 21.00                   | 02100                        | I&R SERVICES-SALARY & FRINGES APPRVD | 4,041                        | 0                   | 0                   | 0                         | 324,559   | 21.00 |
| 22.00                   | 02200                        | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                            | 3,528               | 0                   | 0                         | 314,065   | 22.00 |
| 23.00                   | 02300                        | PARAMED HEALTH SYSTEM MANAGEMENT     | 9,978                        | 0                   | 0                   | 0                         | 92,031    | 23.00 |
| 23.01                   | 02301                        | PARAMED MEDICAL PERFUSION TECH       | 856                          | 0                   | 0                   | 0                         | 4,801     | 23.01 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS                |                              |                     |                     |                           |        |
|----------------------------------------|-------|----------------------------------------|--------------------------------------|------------------------------|---------------------|---------------------|---------------------------|--------|
|                                        |       |                                        | DEPRECIATION<br>ACADEMIC<br>FACILITY | DEPRECIATION<br>PRO BLDG III | DEPRECIATION<br>JRB | DEPRECIATION<br>TOB | DEPRECIATION<br>EQUIPMENT |        |
|                                        |       |                                        | 1.09                                 | 1.10                         | 1.11                | 1.12                | 1.13                      |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 2,823                                | 0                            | 0                   | 0                   | 15,831                    | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 5,627                                | 0                            | 0                   | 0                   | 64,847                    | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 5,207                                | 0                            | 0                   | 0                   | 32,764                    | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                                    | 0                            | 0                   | 0                   | 8,840                     | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                                    | 0                            | 0                   | 0                   | 42,366                    | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 2,638                                | 0                            | 0                   | 0                   | 14,792                    | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 532                                  | 0                            | 0                   | 0                   | 2,984                     | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                                    | 0                            | 0                   | 0                   | 2,628                     | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 2,890                                | 0                            | 0                   | 0                   | 16,204                    | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 2,170                                | 0                            | 0                   | 0                   | 12,165                    | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                      |                              |                     |                     |                           |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                    | 0                            | 0                   | 0                   | 4,016,665                 | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                    | 0                            | 0                   | 0                   | 697,842                   | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 10,009                               | 0                            | 0                   | 0                   | 739,755                   | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                    | 0                            | 0                   | 0                   | 209,998                   | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                    | 0                            | 0                   | 0                   | 597,052                   | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                    | 0                            | 50,209              | 0                   | 428,009                   | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                    | 0                            | 156,285             | 0                   | 394,807                   | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                    | 0                            | 0                   | 0                   | 238,383                   | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                      |                              |                     |                     |                           |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 31,721                               | 6,923                        | 0                   | 0                   | 1,919,813                 | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                    | 0                            | 0                   | 0                   | 492,467                   | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                    | 0                            | 0                   | 0                   | 346,261                   | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 1,820                                | 8,339                        | 0                   | 0                   | 261,675                   | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                    | 95,997                       | 0                   | 0                   | 1,349,118                 | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                    | 0                            | 0                   | 0                   | 373,656                   | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                    | 0                            | 0                   | 0                   | 97,514                    | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 6,188                                | 10,997                       | 0                   | 0                   | 1,596,130                 | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                    | 0                            | 0                   | 0                   | 23,373                    | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                    | 0                            | 0                   | 0                   | 0                         | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                    | 0                            | 0                   | 0                   | 81,440                    | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                    | 0                            | 0                   | 0                   | 0                         | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                    | 0                            | 0                   | 0                   | 108,803                   | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                    | 0                            | 38,742              | 0                   | 202,537                   | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                    | 0                            | 33,490              | 0                   | 181,970                   | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                    | 0                            | 2,973               | 0                   | 122,184                   | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                    | 0                            | 0                   | 0                   | 241,221                   | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                    | 0                            | 0                   | 0                   | 39,820                    | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                    | 0                            | 0                   | 0                   | 0                         | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                    | 0                            | 0                   | 0                   | 0                         | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                    | 0                            | 0                   | 0                   | 0                         | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                    | 0                            | 0                   | 0                   | 0                         | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                    | 0                            | 0                   | 0                   | 33,737                    | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                    | 0                            | 25,008              | 0                   | 233,955                   | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                      |                              |                     |                     |                           |        |
| 90.00                                  | 09000 | CLINIC                                 | 3,414                                | 442,341                      | 29,657              | 0                   | 2,152,438                 | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                    | 0                            | 0                   | 0                   | 824,487                   | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                    | 0                            | 0                   | 0                   | 0                         | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                    | 0                            | 0                   | 0                   | 0                         | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                    | 0                            | 0                   | 0                   | 0                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                      |                              |                     |                     |                           |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                    | 0                            | 0                   | 0                   | 0                         | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                    | 0                            | 0                   | 0                   | 0                         | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                    | 0                            | 0                   | 0                   | 0                         | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                      |                              |                     |                     |                           |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                                    | 11,245                       | 0                   | 0                   | 26,584                    | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                    | 0                            | 0                   | 0                   | 0                         | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                                    | 3,494                        | 0                   | 0                   | 8,207                     | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                    | 0                            | 0                   | 0                   | 0                         | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                    | 33                           | 0                   | 0                   | 65                        | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                    | 0                            | 0                   | 0                   | 0                         | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                    | 0                            | 0                   | 0                   | 0                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 722,636                              | 952,933                      | 462,164             | 0                   | 38,516,526                | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                      |                              |                     |                     |                           |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 3,489                                | 0                            | 183,766             | 0                   | 764,214                   | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                    | 0                            | 0                   | 0                   | 0                         | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                    | 0                            | 0                   | 0                   | 106,062                   | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 16,556                               | 580                          | 1,746               | 0                   | 2,673,387                 | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 2,685                                | 12,785                       | 3,178               | 0                   | 234,798                   | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 3,642                                | 1,226                        | 13,670              | 0                   | 434,546                   | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 6,185                                | 626,309                      | 44,989              | 0                   | 6,294,353                 | 192.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

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11/24/2019 4:22 pm

| Cost Center Description |       |                                   | CAPITAL RELATED COSTS                |                              |                     |                     |                           |        |
|-------------------------|-------|-----------------------------------|--------------------------------------|------------------------------|---------------------|---------------------|---------------------------|--------|
|                         |       |                                   | DEPRECIATION<br>ACADEMIC<br>FACILITY | DEPRECIATION<br>PRO BLDG III | DEPRECIATION<br>JRB | DEPRECIATION<br>TOB | DEPRECIATION<br>EQUIPMENT |        |
|                         |       |                                   | 1.09                                 | 1.10                         | 1.11                | 1.12                | 1.13                      |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                   | 49,229                               | 0                            | 9,323               | 0                   | 402,982                   | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           | 0                                    | 12,454                       | 0                   | 0                   | 121,941                   | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                                    | 0                            | 0                   | 0                   | 433,443                   | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                                    | 0                            | 0                   | 0                   | 0                         | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                                    | 0                            | 0                   | 0                   | 0                         | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                                      |                              |                     |                     |                           | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                                    | 0                            | 0                   | 0                   | 0                         | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 804,422                              | 1,606,287                    | 718,836             | 0                   | 49,982,252                | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

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| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS       |                         |                      |                       |             |       |
|------------------------------|-------|--------------------------------------|-----------------------------|-------------------------|----------------------|-----------------------|-------------|-------|
|                              |       |                                      | DEPRECIATION<br>ORTHOPEDICS | DEPRECIATION<br>KIDSTON | DEPRECIATION<br>COHN | DEPRECIATION<br>TOWER | MVBLE EQUIP |       |
|                              |       |                                      | 1.14                        | 1.15                    | 1.16                 | 1.17                  | 2.00        |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                             |                         |                      |                       |             |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                             |                         |                      |                       |             | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                             |                         |                      |                       |             | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                             |                         |                      |                       |             | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                             |                         |                      |                       |             | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                             |                         |                      |                       |             | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                             |                         |                      |                       |             | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                             |                         |                      |                       |             | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                             |                         |                      |                       |             | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                             |                         |                      |                       |             | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                             |                         |                      |                       |             | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                             |                         |                      |                       |             | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                             |                         |                      |                       |             | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                             |                         |                      |                       |             | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                             |                         |                      |                       |             | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                             |                         |                      |                       |             | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                             |                         |                      |                       |             | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                             |                         |                      |                       |             | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                             |                         |                      |                       |             | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                             |                         |                      |                       |             | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                             |                         |                      |                       |             | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                             |                         |                      |                       |             | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                             |                         |                      |                       |             | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                             |                         |                      |                       |             | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                             |                         |                      |                       |             | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                             |                         |                      |                       |             | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                             |                         |                      |                       |             | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                             |                         |                      |                       |             | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                           | 0                       | 0                    | 0                     | 0           | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                           | 0                       | 0                    | 0                     | 0           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0                           | 0                       | 0                    | 6,757                 | 0           | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                           | 0                       | 30,185               | 0                     | 0           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                           | 2,649                   | 0                    | 0                     | 0           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                           | 0                       | 0                    | 41,577                | 0           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                           | 0                       | 138,946              | 0                     | 0           | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 6,188                       | 2,597                   | 0                    | 652,192               | 0           | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                           | 0                       | 0                    | 0                     | 0           | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                           | 0                       | 0                    | 0                     | 0           | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                           | 0                       | 21,920               | 0                     | 0           | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 114,819                     | 4,772                   | 60,343               | 25,465                | 0           | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 53,458                      | 6,550                   | 77,036               | 2,703,521             | 0           | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                           | 0                       | 0                    | 0                     | 0           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 15,386                      | 0                       | 0                    | 89,583                | 0           | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 116,023                     | 108                     | 9,197                | 203,648               | 0           | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                           | 0                       | 0                    | 0                     | 0           | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                           | 0                       | 0                    | 85,120                | 0           | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0                           | 0                       | 513                  | 128,411               | 0           | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                           | 0                       | 0                    | 39,131                | 0           | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                           | 0                       | 0                    | 730,303               | 0           | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                           | 0                       | 0                    | 60,714                | 0           | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 49,770                      | 0                       | 0                    | 0                     | 0           | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                           | 5,426                   | 0                    | 0                     | 0           | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                           | 0                       | 0                    | 0                     | 0           | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                           | 0                       | 0                    | 0                     | 0           | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                           | 0                       | 0                    | 0                     | 0           | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                           | 20                      | 0                    | 0                     | 0           | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                           | 0                       | 0                    | 0                     | 0           | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                           | 0                       | 0                    | 0                     | 0           | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                           | 0                       | 0                    | 0                     | 0           | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                           | 0                       | 0                    | 0                     | 0           | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                           | 0                       | 0                    | 0                     | 0           | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                           | 0                       | 0                    | 0                     | 0           | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                           | 0                       | 0                    | 0                     | 0           | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                           | 1,523                   | 0                    | 0                     | 0           | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                           | 0                       | 0                    | 0                     | 0           | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                           | 0                       | 0                    | 0                     | 0           | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                           | 0                       | 0                    | 0                     | 0           | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                           | 0                       | 0                    | 113,485               | 0           | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 395                         | 0                       | 0                    | 0                     | 0           | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                           | 0                       | 0                    | 0                     | 0           | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                           | 0                       | 0                    | 0                     | 0           | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                           | 0                       | 0                    | 0                     | 0           | 23.02 |

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| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS       |                         |                      |                       |             |          |
|----------------------------------------|-------|----------------------------------------|-----------------------------|-------------------------|----------------------|-----------------------|-------------|----------|
|                                        |       |                                        | DEPRECIATION<br>ORTHOPEDICS | DEPRECIATION<br>KIDSTON | DEPRECIATION<br>COHN | DEPRECIATION<br>TOWER | MVBLE EQUIP |          |
|                                        |       |                                        | 1.14                        | 1.15                    | 1.16                 | 1.17                  | 2.00        |          |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 6,857                       | 0                       | 0                    | 0                     | 0           | 0 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                           | 1,130                   | 0                    | 0                     | 0           | 0 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                           | 0                       | 0                    | 0                     | 0           | 0 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                             |                         |                      |                       |             |          |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                           | 499                     | 0                    | 3,387,711             | 0           | 0 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                           | 0                       | 0                    | 1,084,777             | 0           | 0 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                           | 0                       | 0                    | 1,062,690             | 0           | 0 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                           | 0                       | 0                    | 0                     | 0           | 0 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                           | 0                       | 0                    | 928,101               | 0           | 0 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                           | 0                       | 0                    | 0                     | 0           | 0 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                           | 0                       | 0                    | 0                     | 0           | 0 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                           | 0                       | 0                    | 0                     | 0           | 0 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                             |                         |                      |                       |             |          |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                           | 0                       | 0                    | 2,127,069             | 0           | 0 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                           | 0                       | 0                    | 572,140               | 0           | 0 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                           | 0                       | 0                    | 538,253               | 0           | 0 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                           | 0                       | 0                    | 151,608               | 0           | 0 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                           | 0                       | 0                    | 1,162,963             | 0           | 0 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                           | 0                       | 2,634                | 23,247                | 0           | 0 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                           | 0                       | 0                    | 151,582               | 0           | 0 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 2,129                       | 1,052                   | 1,229                | 269,102               | 0           | 0 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                           | 0                       | 0                    | 0                     | 0           | 0 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                           | 0                       | 0                    | 0                     | 0           | 0 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                           | 0                       | 0                    | 73,446                | 0           | 0 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                           | 0                       | 0                    | 0                     | 0           | 0 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                           | 0                       | 0                    | 120,141               | 0           | 0 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                           | 0                       | 0                    | 61,470                | 0           | 0 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                           | 0                       | 0                    | 3,505                 | 0           | 0 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 33,835                      | 0                       | 0                    | 1,109                 | 0           | 0 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                           | 0                       | 0                    | 265,546               | 0           | 0 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                           | 0                       | 0                    | 61,899                | 0           | 0 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                           | 0                       | 0                    | 0                     | 0           | 0 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                           | 0                       | 0                    | 0                     | 0           | 0 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                           | 0                       | 0                    | 0                     | 0           | 0 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                           | 0                       | 0                    | 0                     | 0           | 0 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                           | 0                       | 0                    | 0                     | 0           | 0 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                           | 0                       | 0                    | 34,845                | 0           | 0 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                             |                         |                      |                       |             |          |
| 90.00                                  | 09000 | CLINIC                                 | 59,333                      | 0                       | 0                    | 1,740                 | 0           | 0 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                           | 0                       | 0                    | 970,460               | 0           | 0 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                           | 0                       | 0                    | 0                     | 0           | 0 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                           | 0                       | 0                    | 0                     | 0           | 0 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                           | 0                       | 0                    | 0                     | 0           | 0 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                             |                         |                      |                       |             |          |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                           | 0                       | 0                    | 0                     | 0           | 0 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                           | 0                       | 0                    | 0                     | 0           | 0 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                           | 0                       | 0                    | 0                     | 0           | 0 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                             |                         |                      |                       |             |          |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                           | 223                     | 0                    | 0                     | 0           | 0 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                           | 0                       | 0                    | 0                     | 0           | 0 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                           | 66                      | 0                    | 0                     | 0           | 0 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                           | 0                       | 0                    | 0                     | 0           | 0 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                           | 0                       | 0                    | 0                     | 0           | 0 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                           | 0                       | 0                    | 0                     | 0           | 0 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                           | 0                       | 0                    | 0                     | 0           | 0 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 458,193                     | 26,615                  | 342,003              | 17,933,311            | 0           | 0 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                             |                         |                      |                       |             |          |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                           | 0                       | 0                    | 32,223                | 0           | 0 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                           | 0                       | 0                    | 0                     | 0           | 0 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                           | 0                       | 0                    | 0                     | 0           | 0 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 197                         | 70                      | 936,061              | 0                     | 0           | 0 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 188                         | 1,653                   | 729                  | 0                     | 0           | 0 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 3,954                       | 70                      | 105,762              | 0                     | 0           | 0 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 89,002                      | 2,015                   | 11,709               | 5,950                 | 0           | 0 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                           | 724                     | 14,397               | 0                     | 0           | 0 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                           | 0                       | 0                    | 0                     | 0           | 0 194.01 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | CAPITAL RELATED COSTS       |                         |                      |                       |             |          |
|-------------------------|-------|-----------------------------------|-----------------------------|-------------------------|----------------------|-----------------------|-------------|----------|
|                         |       |                                   | DEPRECIATION<br>ORTHOPEDICS | DEPRECIATION<br>KIDSTON | DEPRECIATION<br>COHN | DEPRECIATION<br>TOWER | MVBLE EQUIP |          |
|                         |       |                                   | 1.14                        | 1.15                    | 1.16                 | 1.17                  | 2.00        |          |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                           | 0                       | 0                    | 0                     | 0           | 0 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                           | 0                       | 0                    | 0                     | 0           | 0 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                           | 0                       | 0                    | 0                     | 0           | 0 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                             |                         |                      |                       |             | 200.00   |
| 201.00                  |       | Negative Cost Centers             | 0                           | 0                       | 0                    | 0                     | 0           | 0 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 551,534                     | 31,147                  | 1,410,661            | 17,971,484            | 0           | 0 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS |                         |                       |                            |              |  |
|------------------------------|-------|--------------------------------------|-----------------------|-------------------------|-----------------------|----------------------------|--------------|--|
|                              |       |                                      | INTEREST<br>GENERAL   | INTEREST<br>DIRECT BLDG | INTEREST ATRUM<br>PAV | INTEREST PRO<br>BLDG SOUTH | INTEREST TOB |  |
|                              |       |                                      | 2.01                  | 2.02                    | 2.03                  | 2.04                       | 2.05         |  |
| GENERAL SERVICE COST CENTERS |       |                                      |                       |                         |                       |                            |              |  |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                       |                         |                       |                            | 1.00         |  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                       |                         |                       |                            | 1.01         |  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                       |                         |                       |                            | 1.02         |  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                       |                         |                       |                            | 1.03         |  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                       |                         |                       |                            | 1.04         |  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                       |                         |                       |                            | 1.05         |  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                       |                         |                       |                            | 1.06         |  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                       |                         |                       |                            | 1.07         |  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                       |                         |                       |                            | 1.08         |  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                       |                         |                       |                            | 1.09         |  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                       |                         |                       |                            | 1.10         |  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                       |                         |                       |                            | 1.11         |  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                       |                         |                       |                            | 1.12         |  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                       |                         |                       |                            | 1.13         |  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                       |                         |                       |                            | 1.14         |  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                       |                         |                       |                            | 1.15         |  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                       |                         |                       |                            | 1.16         |  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                       |                         |                       |                            | 1.17         |  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                       |                         |                       |                            | 2.00         |  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                       |                         |                       |                            | 2.01         |  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                       |                         |                       |                            | 2.02         |  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                       |                         |                       |                            | 2.03         |  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                       |                         |                       |                            | 2.04         |  |
| 2.05                         | 00205 | INTEREST TOB                         |                       |                         |                       |                            | 2.05         |  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                       |                         |                       |                            | 2.06         |  |
| 2.07                         | 00207 | INTEREST TOWER                       |                       |                         |                       |                            | 2.07         |  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                       |                         |                       |                            | 2.08         |  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                     | 0                       | 0                     | 0                          | 4.00         |  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                     | 0                       | 0                     | 0                          | 5.01         |  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0                     | 0                       | 0                     | 0                          | 5.02         |  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                     | 0                       | 0                     | 0                          | 5.03         |  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                     | 0                       | 0                     | 0                          | 5.04         |  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                     | 0                       | 0                     | 0                          | 5.05         |  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                     | 0                       | 0                     | 0                          | 5.06         |  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 0                     | 0                       | 0                     | 0                          | 5.07         |  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                     | 0                       | 0                     | 0                          | 5.08         |  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                     | 0                       | 0                     | 0                          | 5.09         |  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                     | 0                       | 0                     | 0                          | 5.10         |  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 0                     | 0                       | 0                     | 0                          | 5.11         |  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0                     | 0                       | 0                     | 0                          | 6.00         |  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                     | 0                       | 0                     | 0                          | 6.01         |  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                     | 0                       | 0                     | 0                          | 8.00         |  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0                     | 0                       | 0                     | 0                          | 9.00         |  |
| 10.00                        | 01000 | DIETARY                              | 0                     | 0                       | 0                     | 0                          | 10.00        |  |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                     | 0                       | 0                     | 0                          | 10.01        |  |
| 11.00                        | 01100 | CAFETERIA                            | 0                     | 0                       | 0                     | 0                          | 11.00        |  |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                     | 0                       | 0                     | 0                          | 13.00        |  |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                     | 0                       | 0                     | 0                          | 14.00        |  |
| 15.00                        | 01500 | PHARMACY                             | 0                     | 0                       | 0                     | 0                          | 15.00        |  |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                     | 0                       | 0                     | 0                          | 16.00        |  |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                     | 0                       | 0                     | 0                          | 16.01        |  |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                     | 0                       | 0                     | 0                          | 18.00        |  |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                     | 0                       | 0                     | 0                          | 18.01        |  |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                     | 0                       | 0                     | 0                          | 18.02        |  |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                     | 0                       | 0                     | 0                          | 18.03        |  |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                     | 0                       | 0                     | 0                          | 18.04        |  |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                     | 0                       | 0                     | 0                          | 18.05        |  |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                     | 0                       | 0                     | 0                          | 18.06        |  |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                     | 0                       | 0                     | 0                          | 18.07        |  |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                     | 0                       | 0                     | 0                          | 18.08        |  |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                     | 0                       | 0                     | 0                          | 18.09        |  |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                     | 0                       | 0                     | 0                          | 18.12        |  |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                     | 0                       | 0                     | 0                          | 18.14        |  |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                     | 0                       | 0                     | 0                          | 18.16        |  |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                     | 0                       | 0                     | 0                          | 19.00        |  |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                     | 0                       | 0                     | 0                          | 20.00        |  |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                     | 0                       | 0                     | 0                          | 21.00        |  |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                     | 0                       | 0                     | 0                          | 22.00        |  |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                     | 0                       | 0                     | 0                          | 23.00        |  |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                     | 0                       | 0                     | 0                          | 23.01        |  |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                     | 0                       | 0                     | 0                          | 23.02        |  |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

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11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS |                         |                       |                            |              |        |
|----------------------------------------|-------|----------------------------------------|-----------------------|-------------------------|-----------------------|----------------------------|--------------|--------|
|                                        |       |                                        | INTEREST<br>GENERAL   | INTEREST<br>DIRECT BLDG | INTEREST ATRUM<br>PAV | INTEREST PRO<br>BLDG SOUTH | INTEREST TOB |        |
|                                        |       |                                        | 2.01                  | 2.02                    | 2.03                  | 2.04                       | 2.05         |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                     | 0                       | 0                     | 0                          | 0            | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                     | 0                       | 0                     | 0                          | 0            | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                     | 0                       | 0                     | 0                          | 0            | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                     | 0                       | 0                     | 0                          | 0            | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                     | 0                       | 0                     | 0                          | 0            | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                     | 0                       | 0                     | 0                          | 0            | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                     | 0                       | 0                     | 0                          | 0            | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                     | 0                       | 0                     | 0                          | 0            | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                     | 0                       | 0                     | 0                          | 0            | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                       |                         |                       |                            |              |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                     | 0                       | 0                     | 0                          | 0            | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                     | 0                       | 0                     | 0                          | 0            | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                     | 0                       | 0                     | 0                          | 0            | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                     | 0                       | 0                     | 0                          | 0            | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                     | 0                       | 0                     | 0                          | 0            | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                     | 0                       | 0                     | 0                          | 0            | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                     | 0                       | 0                     | 0                          | 0            | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                     | 0                       | 0                     | 0                          | 0            | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                       |                         |                       |                            |              |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                     | 0                       | 0                     | 0                          | 0            | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                     | 0                       | 0                     | 0                          | 0            | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                     | 0                       | 0                     | 0                          | 0            | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                     | 0                       | 0                     | 0                          | 0            | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                     | 0                       | 0                     | 0                          | 0            | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                     | 0                       | 0                     | 0                          | 0            | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                     | 0                       | 0                     | 0                          | 0            | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                     | 0                       | 0                     | 0                          | 0            | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                     | 0                       | 0                     | 0                          | 0            | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                     | 0                       | 0                     | 0                          | 0            | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                     | 0                       | 0                     | 0                          | 0            | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                     | 0                       | 0                     | 0                          | 0            | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                     | 0                       | 0                     | 0                          | 0            | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                     | 0                       | 0                     | 0                          | 0            | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                     | 0                       | 0                     | 0                          | 0            | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                     | 0                       | 0                     | 0                          | 0            | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                     | 0                       | 0                     | 0                          | 0            | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                     | 0                       | 0                     | 0                          | 0            | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                     | 0                       | 0                     | 0                          | 0            | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                     | 0                       | 0                     | 0                          | 0            | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                     | 0                       | 0                     | 0                          | 0            | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                     | 0                       | 0                     | 0                          | 0            | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                     | 0                       | 0                     | 0                          | 0            | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                     | 0                       | 0                     | 0                          | 0            | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                       |                         |                       |                            |              |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                     | 0                       | 0                     | 0                          | 0            | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                     | 0                       | 0                     | 0                          | 0            | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                     | 0                       | 0                     | 0                          | 0            | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                     | 0                       | 0                     | 0                          | 0            | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                     | 0                       | 0                     | 0                          | 0            | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                       |                         |                       |                            |              |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                     | 0                       | 0                     | 0                          | 0            | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                     | 0                       | 0                     | 0                          | 0            | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                     | 0                       | 0                     | 0                          | 0            | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                       |                         |                       |                            |              |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                     | 0                       | 0                     | 0                          | 0            | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                     | 0                       | 0                     | 0                          | 0            | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                     | 0                       | 0                     | 0                          | 0            | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                     | 0                       | 0                     | 0                          | 0            | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                     | 0                       | 0                     | 0                          | 0            | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                     | 0                       | 0                     | 0                          | 0            | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                     | 0                       | 0                     | 0                          | 0            | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                     | 0                       | 0                     | 0                          | 0            | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                       |                         |                       |                            |              |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                     | 0                       | 0                     | 0                          | 0            | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                     | 0                       | 0                     | 0                          | 0            | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                     | 0                       | 0                     | 0                          | 0            | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                     | 0                       | 0                     | 0                          | 0            | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                     | 0                       | 0                     | 0                          | 0            | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                     | 0                       | 0                     | 0                          | 0            | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                     | 0                       | 0                     | 0                          | 0            | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                     | 0                       | 0                     | 0                          | 0            | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                     | 0                       | 0                     | 0                          | 0            | 194.01 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | CAPITAL RELATED COSTS |                         |                       |                            |              |          |
|-------------------------|-------|-----------------------------------|-----------------------|-------------------------|-----------------------|----------------------------|--------------|----------|
|                         |       |                                   | INTEREST<br>GENERAL   | INTEREST<br>DIRECT BLDG | INTEREST ATRUM<br>PAV | INTEREST PRO<br>BLDG SOUTH | INTEREST TOB |          |
|                         |       |                                   | 2.01                  | 2.02                    | 2.03                  | 2.04                       | 2.05         |          |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                     | 0                       | 0                     | 0                          | 0            | 0 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                     | 0                       | 0                     | 0                          | 0            | 0 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                     | 0                       | 0                     | 0                          | 0            | 0 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                       |                         |                       |                            |              | 200.00   |
| 201.00                  |       | Negative Cost Centers             | 0                     | 0                       | 0                     | 0                          | 0            | 0 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 0                     | 0                       | 0                     | 0                          | 0            | 0 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS |                |                         | Subtotal   | EMPLOYEE BENEFITS DEPARTMENT |       |
|------------------------------|-------|--------------------------------------|-----------------------|----------------|-------------------------|------------|------------------------------|-------|
|                              |       |                                      | INTEREST PRO BLDG III | INTEREST TOWER | INTEREST PRO BLDG NORTH |            |                              |       |
|                              |       |                                      | 2.06                  | 2.07           | 2.08                    |            |                              |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                       |                |                         | 2A         | 4.00                         |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                       |                |                         |            |                              | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                       |                |                         |            |                              | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                       |                |                         |            |                              | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                       |                |                         |            |                              | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                       |                |                         |            |                              | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                       |                |                         |            |                              | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                       |                |                         |            |                              | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                       |                |                         |            |                              | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                       |                |                         |            |                              | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                       |                |                         |            |                              | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                       |                |                         |            |                              | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                       |                |                         |            |                              | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                       |                |                         |            |                              | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                       |                |                         |            |                              | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                       |                |                         |            |                              | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                       |                |                         |            |                              | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                       |                |                         |            |                              | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                       |                |                         |            |                              | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                       |                |                         |            |                              | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                       |                |                         |            |                              | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                       |                |                         |            |                              | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                       |                |                         |            |                              | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                       |                |                         |            |                              | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                       |                |                         |            |                              | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                       |                |                         |            |                              | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                       |                |                         |            |                              | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                       |                |                         |            |                              | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                     | 0              | 0                       | 357,499    | 357,499                      | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                     | 0              | 0                       | 0          | 0                            | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0                     | 0              | 0                       | 4,431,481  | 0                            | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                     | 0              | 0                       | 133,731    | 2,189                        | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                     | 0              | 0                       | 90,387     | 1,491                        | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                     | 0              | 0                       | 176,841    | 1,371                        | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                     | 0              | 0                       | 491,765    | 678                          | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 0                     | 0              | 0                       | 2,963,740  | 14,565                       | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                     | 0              | 0                       | 154,753    | 2,167                        | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                     | 0              | 0                       | 29,629     | 5,114                        | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                     | 0              | 0                       | 335,218    | 2,794                        | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 0                     | 0              | 0                       | 3,068,186  | 29,047                       | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0                     | 0              | 0                       | 17,050,233 | 3,234                        | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                     | 0              | 0                       | 0          | 0                            | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                     | 0              | 0                       | 287,393    | 318                          | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0                     | 0              | 0                       | 1,526,099  | 7,813                        | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                     | 0              | 0                       | 76,606     | 154                          | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                     | 0              | 0                       | 1,012,915  | 2,709                        | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0                     | 0              | 0                       | 965,387    | 607                          | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                     | 0              | 0                       | 473,310    | 4,506                        | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                     | 0              | 0                       | 1,402,162  | 0                            | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                     | 0              | 0                       | 650,762    | 4,977                        | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                     | 0              | 0                       | 262,604    | 2,038                        | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                     | 0              | 0                       | 246,373    | 4,845                        | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                     | 0              | 0                       | 0          | 235                          | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                     | 0              | 0                       | 10,667     | 94                           | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                     | 0              | 0                       | 202,043    | 768                          | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                     | 0              | 0                       | 164,708    | 879                          | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                     | 0              | 0                       | 77,239     | 98                           | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                     | 0              | 0                       | 497,907    | 37                           | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                     | 0              | 0                       | 0          | 42                           | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                     | 0              | 0                       | 0          | 0                            | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                     | 0              | 0                       | 12,320     | 850                          | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                     | 0              | 0                       | 38,585     | 386                          | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                     | 0              | 0                       | 127,349    | 666                          | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                     | 0              | 0                       | 2,310,489  | 3,860                        | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                     | 0              | 0                       | 355,286    | 6,018                        | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                     | 0              | 0                       | 0          | 1,511                        | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                     | 0              | 0                       | 0          | 0                            | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                     | 0              | 0                       | 722,047    | 18,102                       | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                     | 0              | 0                       | 545,098    | 2,661                        | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                     | 0              | 0                       | 103,776    | 1,241                        | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                     | 0              | 0                       | 5,657      | 214                          | 23.01 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS    |                |                            | Subtotal   | EMPLOYEE<br>BENEFITS<br>DEPARTMENT |        |
|----------------------------------------|-------|----------------------------------------|--------------------------|----------------|----------------------------|------------|------------------------------------|--------|
|                                        |       |                                        | INTEREST PRO<br>BLDG III | INTEREST TOWER | INTEREST PRO<br>BLDG NORTH |            |                                    |        |
|                                        |       |                                        | 2.06                     | 2.07           | 2.08                       |            |                                    |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                        | 0              | 0                          | 18,654     | 130                                | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                        | 0              | 0                          | 82,293     | 483                                | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                        | 0              | 0                          | 39,707     | 385                                | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                        | 0              | 0                          | 21,418     | 106                                | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                        | 0              | 0                          | 70,802     | 223                                | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                        | 0              | 0                          | 17,430     | 213                                | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                        | 0              | 0                          | 3,516      | 94                                 | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                        | 0              | 0                          | 6,367      | 261                                | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                        | 0              | 0                          | 19,094     | 183                                | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                        | 0              | 0                          | 14,335     | 320                                | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                          |                |                            |            |                                    |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                        | 0              | 0                          | 9,911,033  | 22,854                             | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                        | 0              | 0                          | 1,782,619  | 5,986                              | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                        | 0              | 0                          | 1,812,454  | 6,778                              | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                        | 0              | 0                          | 508,562    | 2,022                              | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                        | 0              | 0                          | 1,525,153  | 4,404                              | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                        | 0              | 0                          | 906,372    | 1,807                              | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                        | 0              | 0                          | 551,092    | 1,710                              | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                        | 0              | 0                          | 577,565    | 752                                | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                          |                |                            |            |                                    |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                        | 0              | 0                          | 4,588,870  | 6,345                              | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                        | 0              | 0                          | 1,241,641  | 2,006                              | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                        | 0              | 0                          | 884,514    | 2,037                              | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                        | 0              | 0                          | 602,785    | 450                                | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                        | 0              | 0                          | 2,955,229  | 5,975                              | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                        | 0              | 0                          | 904,220    | 1,393                              | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                        | 0              | 0                          | 249,096    | 318                                | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                        | 0              | 0                          | 3,395,220  | 10,145                             | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                        | 0              | 0                          | 53,258     | 230                                | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                        | 0              | 0                          | 0          | 0                                  | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                        | 0              | 0                          | 192,351    | 859                                | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                        | 0              | 0                          | 0          | 0                                  | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                        | 0              | 0                          | 273,765    | 2,212                              | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                        | 0              | 0                          | 365,414    | 1,763                              | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                        | 0              | 0                          | 301,955    | 1,351                              | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                        | 0              | 0                          | 160,101    | 918                                | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                        | 0              | 0                          | 606,867    | 1,968                              | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                        | 0              | 0                          | 101,719    | 497                                | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                        | 0              | 0                          | 0          | 0                                  | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                        | 0              | 0                          | 0          | 0                                  | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                        | 0              | 0                          | 0          | 0                                  | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                        | 0              | 0                          | 0          | 0                                  | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                        | 0              | 0                          | 81,714     | 0                                  | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                        | 0              | 0                          | 303,141    | 1,083                              | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                          |                |                            |            |                                    |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                        | 0              | 0                          | 3,237,916  | 10,486                             | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                        | 0              | 0                          | 2,079,537  | 4,311                              | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                        | 0              | 0                          | 0          | 0                                  | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                        | 0              | 0                          | 0          | 0                                  | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                        | 0              | 0                          | 0          | 0                                  | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                          |                |                            |            |                                    |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                        | 0              | 0                          | 0          | 0                                  | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                        | 0              | 0                          | 0          | 0                                  | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                        | 0              | 0                          | 0          | 0                                  | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                          |                |                            |            |                                    |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                        | 0              | 0                          | 38,052     | 601                                | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                        | 0              | 0                          | 0          | 0                                  | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                        | 0              | 0                          | 11,767     | 302                                | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                        | 0              | 0                          | 0          | 0                                  | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                        | 0              | 0                          | 98         | 30                                 | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                        | 0              | 0                          | 0          | 0                                  | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                        | 0              | 0                          | 0          | 0                                  | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                        | 0              | 0                          | 81,857,941 | 232,270                            | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                          |                |                            |            |                                    |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                        | 0              | 0                          | 1,136,486  | 507                                | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                        | 0              | 0                          | 0          | 3,290                              | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                        | 0              | 0                          | 106,062    | 643                                | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                        | 0              | 0                          | 6,333,673  | 9,398                              | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                        | 0              | 0                          | 297,077    | 8,701                              | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                        | 0              | 0                          | 767,011    | 1,145                              | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                        | 0              | 0                          | 8,953,632  | 87,279                             | 192.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

 Period:  
 From 07/01/2018  
 To 06/30/2019

 Worksheet B  
 Part II  
 Date/Time Prepared:  
 11/24/2019 4:22 pm

| Cost Center Description |       |                                   | CAPITAL RELATED COSTS    |                |                            | Subtotal    | EMPLOYEE<br>BENEFITS<br>DEPARTMENT |        |
|-------------------------|-------|-----------------------------------|--------------------------|----------------|----------------------------|-------------|------------------------------------|--------|
|                         |       |                                   | INTEREST PRO<br>BLDG III | INTEREST TOWER | INTEREST PRO<br>BLDG NORTH |             |                                    |        |
|                         |       |                                   | 2.06                     | 2.07           | 2.08                       |             |                                    |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                   | 0                        | 0              | 0                          | 561,230     | 6,501                              | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           | 0                        | 0              | 0                          | 191,448     | 3,296                              | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                        | 0              | 0                          | 654,474     | 360                                | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                        | 0              | 0                          | 0           | 4,063                              | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                        | 0              | 0                          | 0           | 46                                 | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                          |                |                            | 0           |                                    | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                        | 0              | 0                          | 0           | 0                                  | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 0                        | 0              | 0                          | 100,859,034 | 357,499                            | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | TRANSITION<br>RECRUITMENT            | PARKING GARAGE | RESEARCH<br>ADMINISTRATION | ADMIN & GEN<br>INPT SERVICE | ADMIN & GEN<br>OUTPT SERVICE |       |
|------------------------------|-------|--------------------------------------|----------------|----------------------------|-----------------------------|------------------------------|-------|
|                              |       | 5.01                                 | 5.02           | 5.03                       | 5.04                        | 5.05                         |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                |                            |                             |                              |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                |                            |                             |                              | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                |                            |                             |                              | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                |                            |                             |                              | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                |                            |                             |                              | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                |                            |                             |                              | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                |                            |                             |                              | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                |                            |                             |                              | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                |                            |                             |                              | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                |                            |                             |                              | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                |                            |                             |                              | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                |                            |                             |                              | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                |                            |                             |                              | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                |                            |                             |                              | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                |                            |                             |                              | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                |                            |                             |                              | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                |                            |                             |                              | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                |                            |                             |                              | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                |                            |                             |                              | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                |                            |                             |                              | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                |                            |                             |                              | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                |                            |                             |                              | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                |                            |                             |                              | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                |                            |                             |                              | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                |                            |                             |                              | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                |                            |                             |                              | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                |                            |                             |                              | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                |                            |                             |                              | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                |                            |                             |                              | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0              |                            |                             |                              | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0              | 4,431,481                  |                             |                              | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0              | 0                          | 135,920                     |                              | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0              | 0                          | 0                           | 91,878                       | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0              | 0                          | 0                           | 0                            | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0              | 0                          | 0                           | 0                            | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 0              | 0                          | 0                           | 0                            | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0              | 0                          | 0                           | 0                            | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0              | 0                          | 0                           | 0                            | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0              | 0                          | 0                           | 0                            | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 0              | 0                          | 0                           | 0                            | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0              | 0                          | 0                           | 0                            | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0              | 0                          | 0                           | 0                            | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0              | 0                          | 0                           | 0                            | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0              | 0                          | 0                           | 0                            | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0              | 0                          | 0                           | 0                            | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0              | 0                          | 0                           | 0                            | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0              | 0                          | 0                           | 0                            | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0              | 0                          | 0                           | 0                            | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0              | 0                          | 0                           | 0                            | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0              | 0                          | 0                           | 0                            | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0              | 0                          | 0                           | 0                            | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0              | 0                          | 0                           | 0                            | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0              | 0                          | 0                           | 0                            | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0              | 0                          | 0                           | 0                            | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0              | 0                          | 0                           | 0                            | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0              | 0                          | 0                           | 0                            | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0              | 0                          | 0                           | 0                            | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0              | 0                          | 0                           | 0                            | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0              | 0                          | 0                           | 0                            | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0              | 0                          | 0                           | 0                            | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0              | 0                          | 0                           | 0                            | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0              | 0                          | 0                           | 0                            | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0              | 0                          | 0                           | 0                            | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0              | 0                          | 0                           | 0                            | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0              | 0                          | 0                           | 0                            | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0              | 0                          | 0                           | 0                            | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0              | 0                          | 0                           | 0                            | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0              | 0                          | 0                           | 0                            | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0              | 0                          | 0                           | 0                            | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0              | 0                          | 0                           | 0                            | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0              | 0                          | 0                           | 0                            | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0              | 0                          | 0                           | 0                            | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       | 0              | 0                          | 0                           | 0                            | 23.03 |
| 23.04                        | 02304 | PARAMED OCCUPATIONAL THERAPY         | 0              | 0                          | 0                           | 0                            | 23.04 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | TRANSITION<br>RECRUITMENT | PARKING GARAGE | RESEARCH<br>ADMINISTRATION | ADMIN & GEN<br>INPT SERVICE | ADMIN & GEN<br>OUTPT SERVICE |        |
|----------------------------------------|-------|----------------------------------------|---------------------------|----------------|----------------------------|-----------------------------|------------------------------|--------|
|                                        |       |                                        | 5.01                      | 5.02           | 5.03                       | 5.04                        | 5.05                         |        |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                         | 0              | 0                          | 0                           | 0                            | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                         | 0              | 0                          | 0                           | 0                            | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                         | 0              | 0                          | 0                           | 0                            | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                         | 0              | 0                          | 0                           | 0                            | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                         | 0              | 0                          | 0                           | 0                            | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                         | 0              | 0                          | 0                           | 0                            | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                         | 0              | 0                          | 0                           | 0                            | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                           |                |                            |                             |                              |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                         | 0              | 0                          | 10,896                      | 1,262                        | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                         | 0              | 0                          | 3,371                       | 9                            | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                         | 0              | 0                          | 3,421                       | 25                           | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                         | 0              | 0                          | 954                         | 11                           | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                         | 0              | 0                          | 2,693                       | 0                            | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                         | 0              | 0                          | 700                         | 0                            | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                         | 0              | 0                          | 918                         | 0                            | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                         | 0              | 0                          | 226                         | 0                            | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                           |                |                            |                             |                              |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                         | 0              | 0                          | 10,563                      | 13,580                       | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                         | 0              | 0                          | 829                         | 1,698                        | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                         | 0              | 0                          | 1,000                       | 335                          | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                         | 0              | 0                          | 2,815                       | 3,828                        | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                         | 0              | 0                          | 7,079                       | 15,896                       | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                         | 0              | 0                          | 224                         | 9,405                        | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                         | 0              | 0                          | 200                         | 2,121                        | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                         | 0              | 0                          | 9,688                       | 26,586                       | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                         | 0              | 0                          | 15                          | 476                          | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                         | 0              | 0                          |                             |                              | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                         | 0              | 0                          | 1,700                       | 1,164                        | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                         | 0              | 0                          | 1,688                       | 300                          | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                         | 0              | 0                          | 1,985                       | 100                          | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                         | 0              | 0                          | 851                         | 986                          | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                         | 0              | 0                          | 742                         | 326                          | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                         | 0              | 0                          | 335                         | 429                          | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                         | 0              | 0                          | 2,534                       | 5,280                        | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                         | 0              | 0                          | 758                         | 374                          | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                         | 0              | 0                          | 3,518                       | 3,552                        | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                         | 0              | 0                          | 8,340                       | 6,175                        | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                         | 0              | 0                          | 10,290                      | 47,239                       | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                         | 0              | 0                          | 0                           | 0                            | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                         | 0              | 0                          | 596                         | 31                           | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                         | 0              | 0                          | 0                           | 51                           | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                           |                |                            |                             |                              |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                         | 0              | 0                          | 51                          | 25,415                       | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                         | 0              | 0                          | 2,152                       | 11,558                       | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                         | 0              | 0                          | 0                           | 0                            | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                         | 0              | 0                          | 0                           | 0                            | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                         | 0              | 0                          | 0                           | 0                            | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                           |                |                            |                             |                              |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                         | 0              | 0                          | 0                           | 0                            | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                         | 0              | 0                          | 0                           | 0                            | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                         | 0              | 0                          | 0                           | 0                            | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                           |                |                            |                             |                              |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                         | 0              | 0                          | 608                         | 0                            | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                         | 0              | 0                          | 0                           | 0                            | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                         | 0              | 0                          | 120                         | 0                            | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                         | 0              | 0                          | 0                           | 0                            | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                         | 0              | 0                          | 18                          | 0                            | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                         | 0              | 0                          | 0                           | 0                            | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                         | 0              | 0                          | 0                           | 0                            | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                         | 0              | 0                          | 91,878                      | 178,212                      | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                           |                |                            |                             |                              |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                         | 0              | 0                          | 0                           | 0                            | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                         | 0              | 0                          | 0                           | 0                            | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                         | 0              | 0                          | 0                           | 0                            | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                         | 0              | 51,187                     | 0                           | 0                            | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                         | 0              | 41,666                     | 0                           | 0                            | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                         | 0              | 43,067                     | 0                           | 0                            | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                         | 0              | 0                          | 0                           | 0                            | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                         | 0              | 0                          | 0                           | 0                            | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                         | 0              | 0                          | 0                           | 0                            | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 0                         | 0              | 0                          | 0                           | 0                            | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 0                         | 0              | 0                          | 0                           | 0                            | 194.03 |
| 194.04                                 | 07954 | CON - GNE                              | 0                         | 0              | 0                          | 0                           | 0                            | 194.04 |
| 200.00                                 |       | Cross Foot Adjustments                 |                           |                |                            |                             |                              | 200.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                                   | TRANSITION  | PARKING GARAGE | RESEARCH       | ADMIN & GEN  | ADMIN & GEN   |        |
|-------------------------|-----------------------------------|-------------|----------------|----------------|--------------|---------------|--------|
|                         |                                   | RECRUITMENT |                | ADMINISTRATION | INPT SERVICE | OUTPT SERVICE |        |
|                         |                                   | 5.01        | 5.02           | 5.03           | 5.04         | 5.05          |        |
| 201.00                  | Negative Cost Centers             | 0           | 4,431,481      | 0              | 0            | 0             | 201.00 |
| 202.00                  | TOTAL (sum lines 118 through 201) | 0           | 4,431,481      | 135,920        | 91,878       | 178,212       | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | ADMIN & GEN<br>ANIMAL LAB            | ADMIN & GEN PT<br>SERVICE | PERSONNEL<br>DEPARTMENT | RESEARCH<br>FACULTY | RESEARCH SPA |       |
|------------------------------|-------|--------------------------------------|---------------------------|-------------------------|---------------------|--------------|-------|
|                              |       | 5.06                                 | 5.07                      | 5.08                    | 5.09                | 5.10         |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                           |                         |                     |              |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                           |                         |                     |              | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                           |                         |                     |              | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                           |                         |                     |              | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                           |                         |                     |              | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                           |                         |                     |              | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                           |                         |                     |              | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                           |                         |                     |              | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                           |                         |                     |              | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                           |                         |                     |              | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                           |                         |                     |              | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                           |                         |                     |              | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                           |                         |                     |              | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                           |                         |                     |              | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                           |                         |                     |              | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                           |                         |                     |              | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                           |                         |                     |              | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                           |                         |                     |              | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                           |                         |                     |              | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                           |                         |                     |              | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                           |                         |                     |              | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                           |                         |                     |              | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                           |                         |                     |              | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                           |                         |                     |              | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                           |                         |                     |              | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                           |                         |                     |              | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                           |                         |                     |              | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                           |                         |                     |              | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                           |                         |                     |              | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                           |                         |                     |              | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                           |                         |                     |              | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                           |                         |                     |              | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                           |                         |                     |              | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                           |                         |                     |              | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 492,443                   |                         |                     |              | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 0                         | 2,978,305               |                     |              | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                         | 0                       | 156,920             |              | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 94,532                    | 0                       | 0                   | 129,275      | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                         | 0                       | 0                   | 0            | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 0                         | 0                       | 0                   | 338,012      | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0                         | 0                       | 2,621               | 0            | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                         | 0                       | 0                   | 0            | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                         | 0                       | 332                 | 0            | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0                         | 0                       | 8,019               | 0            | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                         | 0                       | 145                 | 0            | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                         | 0                       | 2,774               | 0            | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0                         | 0                       | 681                 | 0            | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                         | 0                       | 1,994               | 0            | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                         | 0                       | 0                   | 0            | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                         | 0                       | 2,657               | 0            | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                         | 0                       | 1,340               | 0            | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                         | 0                       | 2,707               | 0            | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                         | 0                       | 38                  | 0            | 18.00 |
| 18.01                        | 01851 | CLINICAL LAB ADMIN PED               | 0                         | 0                       | 21                  | 0            | 18.01 |
| 18.02                        | 01852 | CLINICAL LAB ADMIN OB                | 0                         | 0                       | 233                 | 0            | 18.02 |
| 18.03                        | 01853 | CLINICAL LAB ADMIN SURG              | 0                         | 0                       | 370                 | 0            | 18.03 |
| 18.04                        | 01854 | CLINICAL LAB ADMIN PSYCH             | 0                         | 0                       | 49                  | 0            | 18.04 |
| 18.05                        | 01855 | CLINICAL LAB ADMIN PATH              | 0                         | 0                       | 29                  | 0            | 18.05 |
| 18.06                        | 01856 | CLINICAL LAB ADMIN CARD              | 0                         | 0                       | 17                  | 0            | 18.06 |
| 18.07                        | 01857 | CLINICAL LAB ADMIN HEMAT             | 0                         | 0                       | 0                   | 0            | 18.07 |
| 18.08                        | 01858 | CLINICAL LAB ADMIN NEUR              | 0                         | 0                       | 246                 | 0            | 18.08 |
| 18.09                        | 01859 | CLINICAL LAB ADMIN OCLS              | 0                         | 0                       | 208                 | 0            | 18.09 |
| 18.12                        | 01860 | DISCRETIONARY OPERATIONS             | 0                         | 0                       | 623                 | 0            | 18.12 |
| 18.14                        | 01861 | RUSH UNIVERSITY ADMIN SPLIT          | 0                         | 0                       | 2,176               | 0            | 18.14 |
| 18.16                        | 01862 | NURSING SCHOOL SPLIT                 | 0                         | 0                       | 2,689               | 0            | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                         | 0                       | 376                 | 0            | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                         | 0                       | 0                   | 0            | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                         | 0                       | 14,868              | 0            | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                         | 0                       | 887                 | 0            | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                         | 0                       | 452                 | 0            | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                         | 0                       | 74                  | 0            | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                         | 0                       | 64                  | 0            | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       | 0                         | 0                       | 221                 | 0            | 23.03 |
| 23.04                        | 02304 | PARAMED OCCUPATIONAL THERAPY         | 0                         | 0                       | 198                 | 0            | 23.04 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
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Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | ADMIN & GEN<br>ANIMAL LAB | ADMIN & GEN PT<br>SERVICE | PERSONNEL<br>DEPARTMENT | RESEARCH<br>FACULTY | RESEARCH SPA |        |
|----------------------------------------|-------|----------------------------------------|---------------------------|---------------------------|-------------------------|---------------------|--------------|--------|
|                                        |       |                                        | 5.06                      | 5.07                      | 5.08                    | 5.09                | 5.10         |        |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                         | 0                         | 70                      | 0                   | 0            | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                         | 0                         | 189                     | 0                   | 0            | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                         | 0                         | 113                     | 0                   | 0            | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                         | 0                         | 39                      | 0                   | 0            | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                         | 0                         | 209                     | 0                   | 0            | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                         | 0                         | 80                      | 0                   | 0            | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                         | 0                         | 145                     | 0                   | 0            | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                           |                           |                         |                     |              |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 6                         | 198,569                   | 14,426                  | 0                   | 0            | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                         | 58,153                    | 3,663                   | 0                   | 0            | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                         | 59,142                    | 3,747                   | 0                   | 0            | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                         | 16,523                    | 1,235                   | 0                   | 0            | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                         | 46,405                    | 2,586                   | 0                   | 0            | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                         | 12,070                    | 1,236                   | 0                   | 0            | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                         | 15,826                    | 1,073                   | 0                   | 0            | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                         | 3,888                     | 413                     | 0                   | 0            | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                           |                           |                         |                     |              |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                         | 287,958                   | 4,383                   | 0                   | 0            | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                         | 27,524                    | 1,147                   | 0                   | 0            | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                         | 19,849                    | 1,146                   | 0                   | 0            | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                         | 78,360                    | 358                     | 0                   | 0            | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                         | 245,982                   | 3,397                   | 0                   | 0            | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                         | 77,226                    | 699                     | 0                   | 0            | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                         | 19,990                    | 154                     | 0                   | 0            | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                         | 374,325                   | 6,504                   | 0                   | 0            | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                         | 3,962                     | 119                     | 0                   | 0            | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                         |                           |                         |                     |              | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                         | 38,367                    | 527                     | 0                   | 0            | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                         | 31,440                    | 0                       | 0                   | 0            | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                         | 34,988                    | 1,403                   | 0                   | 0            | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                         | 22,358                    | 1,058                   | 0                   | 0            | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                         | 15,320                    | 779                     | 0                   | 0            | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                         | 9,125                     | 508                     | 0                   | 0            | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                         | 84,849                    | 1,196                   | 0                   | 0            | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                         | 15,975                    | 392                     | 0                   | 0            | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                         | 88,333                    | 0                       | 0                   | 0            | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                         | 191,890                   | 0                       | 0                   | 0            | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                         | 549,791                   | 0                       | 0                   | 0            | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                         | 0                         | 0                       | 0                   | 0            | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                         | 10,518                    | 0                       | 0                   | 0            | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                         | 399                       | 764                     | 0                   | 0            | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                           |                           |                         |                     |              |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                         | 199,107                   | 8,588                   | 0                   | 0            | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                         | 127,241                   | 2,704                   | 0                   | 0            | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                         | 0                         | 0                       | 0                   | 0            | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                         | 0                         | 0                       | 0                   | 0            | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                         | 0                         | 0                       | 0                   | 0            | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                           |                           |                         |                     |              |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                         | 0                         | 0                       | 0                   | 0            | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                         | 0                         | 0                       | 0                   | 0            | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                         | 0                         | 0                       | 0                   | 0            | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                           |                           |                         |                     |              |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                         | 10,470                    | 343                     | 0                   | 0            | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                         | 0                         | 0                       | 0                   | 0            | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                         | 2,067                     | 136                     | 0                   | 0            | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                         | 0                         | 0                       | 0                   | 0            | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                         | 315                       | 9                       | 0                   | 0            | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                         | 0                         | 0                       | 0                   | 0            | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                         | 0                         | 0                       | 0                   | 0            | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 94,538                    | 2,978,305                 | 112,647                 | 0                   | 0            | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                           |                           |                         |                     |              |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                         | 0                         | 229                     | 0                   | 0            | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                         | 0                         | 1,342                   | 0                   | 0            | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                         | 0                         | 411                     | 0                   | 0            | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                         | 0                         | 5,706                   | 0                   | 186,414      | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                         | 0                         | 5,605                   | 0                   | 151,598      | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 393,585                   | 0                         | 385                     | 129,275             | 0            | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                         | 0                         | 24,636                  | 0                   | 0            | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 4,320                     | 0                         | 2,232                   | 0                   | 0            | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                         | 0                         | 1,862                   | 0                   | 0            | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 0                         | 0                         | 487                     | 0                   | 0            | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 0                         | 0                         | 1,345                   | 0                   | 0            | 194.03 |
| 194.04                                 | 07954 | CON - GNE                              | 0                         | 0                         | 33                      | 0                   | 0            | 194.04 |
| 200.00                                 |       | Cross Foot Adjustments                 |                           |                           |                         |                     |              | 200.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

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11/24/2019 4:22 pm

| Cost Center Description |  |                                   | ADMIN & GEN<br>ANIMAL LAB | ADMIN & GEN PT<br>SERVICE | PERSONNEL<br>DEPARTMENT | RESEARCH<br>FACULTY | RESEARCH SPA |        |
|-------------------------|--|-----------------------------------|---------------------------|---------------------------|-------------------------|---------------------|--------------|--------|
|                         |  |                                   | 5.06                      | 5.07                      | 5.08                    | 5.09                | 5.10         |        |
| 201.00                  |  | Negative Cost Centers             | 0                         | 0                         | 0                       | 0                   | 0            | 201.00 |
| 202.00                  |  | TOTAL (sum lines 118 through 201) | 492,443                   | 2,978,305                 | 156,920                 | 129,275             | 338,012      | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

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Period:  
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11/24/2019 4:22 pm

| Cost Center Description      |       | CORPORATE<br>ADMINISTRATION          | MAINTENANCE &<br>REPAIRS | RENTED SPACE<br>COSTS | LAUNDRY &<br>LINEN SERVICE | HOUSEKEEPING |       |
|------------------------------|-------|--------------------------------------|--------------------------|-----------------------|----------------------------|--------------|-------|
|                              |       | 5.11                                 | 6.00                     | 6.01                  | 8.00                       | 9.00         |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                          |                       |                            |              |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                          |                       |                            |              | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                          |                       |                            |              | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                          |                       |                            |              | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                          |                       |                            |              | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                          |                       |                            |              | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                          |                       |                            |              | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                          |                       |                            |              | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                          |                       |                            |              | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                          |                       |                            |              | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                          |                       |                            |              | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                          |                       |                            |              | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                          |                       |                            |              | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                          |                       |                            |              | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                          |                       |                            |              | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                          |                       |                            |              | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                          |                       |                            |              | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                          |                       |                            |              | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                          |                       |                            |              | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                          |                       |                            |              | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                          |                       |                            |              | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                          |                       |                            |              | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                          |                       |                            |              | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                          |                       |                            |              | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                          |                       |                            |              | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                          |                       |                            |              | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                          |                       |                            |              | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                          |                       |                            |              | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                          |                       |                            |              | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                          |                       |                            |              | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                          |                       |                            |              | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                          |                       |                            |              | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                          |                       |                            |              | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                          |                       |                            |              | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                          |                       |                            |              | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                          |                       |                            |              | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                          |                       |                            |              | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                          |                       |                            |              | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                          |                       |                            |              | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 3,097,233                |                       |                            |              | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 145,380                  | 17,201,468            |                            |              | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                        | 0                     | 0                          |              | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 7,426                    | 72,440                | 0                          | 367,909      | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 50,427                   | 434,507               | 0                          | 0            | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 1,000                    | 39,097                | 0                          | 0            | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 19,915                   | 212,767               | 0                          | 0            | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 2,536                    | 311,911               | 0                          | 0            | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 32,111                   | 117,389               | 0                          | 0            | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 2,487                    | 284,810               | 0                          | 0            | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 37,652                   | 140,675               | 0                          | 0            | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 16,736                   | 101,388               | 0                          | 0            | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 30,174                   | 88,300                | 0                          | 0            | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 910                      | 0                     | 0                          | 0            | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               | 270                      | 3,129                 | 0                          | 0            | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 3,582                    | 51,398                | 0                          | 0            | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 5,149                    | 36,249                | 0                          | 0            | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 202                      | 0                     | 0                          | 0            | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 2,114                    | 111,520               | 0                          | 0            | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 2,894                    | 0                     | 0                          | 0            | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                        | 0                     | 0                          | 0            | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 3,245                    | 4,147                 | 0                          | 0            | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 4,719                    | 8,642                 | 0                          | 0            | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                        | 30,595                | 0                          | 0            | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 30,628                   | 861,639               | 0                          | 0            | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 36,429                   | 149,681               | 0                          | 0            | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 1,561                    | 0                     | 0                          | 0            | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                        | 0                     | 0                          | 0            | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 101,700                  | 165,641               | 0                          | 0            | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 17,051                   | 103,283               | 0                          | 0            | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 765                      | 46,969                | 0                          | 0            | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                        | 2,450                 | 0                          | 0            | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                        | 8,079                 | 0                          | 0            | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       | 0                        | 33,095                | 0                          | 0            | 23.03 |
| 23.04                        | 02304 | PARAMED OCCUPATIONAL THERAPY         | 0                        | 16,721                | 0                          | 0            | 23.04 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CORPORATE<br>ADMINISTRATION | MAINTENANCE &<br>REPAIRS | RENTED SPACE<br>COSTS | LAUNDRY &<br>LINEN SERVICE | HOUSEKEEPING |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------|--------------------------|-----------------------|----------------------------|--------------|--------|
|                                        |       |                                        | 5.11                        | 6.00                     | 6.01                  | 8.00                       | 9.00         |        |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 576                         | 4,511                    | 0                     | 0                          | 548          | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 1,344                       | 21,622                   | 0                     | 0                          | 2,625        | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                           | 7,549                    | 0                     | 0                          | 917          | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                           | 1,523                    | 0                     | 0                          | 185          | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 1,421                       | 1,341                    | 0                     | 0                          | 163          | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 228                         | 8,270                    | 0                     | 0                          | 1,004        | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                           | 6,208                    | 0                     | 0                          | 754          | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                             |                          |                       |                            |              |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 166,859                     | 2,026,787                | 0                     | 87,859                     | 246,070      | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 43,008                      | 356,149                  | 0                     | 8,356                      | 43,240       | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 47,713                      | 377,539                  | 0                     | 16,049                     | 45,837       | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 14,277                      | 107,174                  | 0                     | 0                          | 13,012       | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 31,367                      | 304,710                  | 0                     | 4,298                      | 36,994       | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 12,213                      | 218,437                  | 0                     | 11,030                     | 26,520       | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 11,621                      | 201,492                  | 0                     | 18,931                     | 24,463       | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 7,873                       | 121,660                  | 0                     | 10,910                     | 14,771       | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                             |                          |                       |                            |              |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 75,039                      | 979,789                  | 0                     | 32,985                     | 118,955      | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 15,438                      | 251,334                  | 0                     | 0                          | 30,514       | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 15,366                      | 176,717                  | 0                     | 0                          | 21,455       | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 14,421                      | 133,547                  | 0                     | 0                          | 16,214       | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 60,256                      | 671,222                  | 0                     | 47,831                     | 81,492       | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 22,697                      | 190,698                  | 0                     | 0                          | 23,152       | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 8,324                       | 49,767                   | 0                     | 11,191                     | 6,042        | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 132,157                     | 778,760                  | 0                     | 14,363                     | 94,549       | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 3,411                       | 11,928                   | 0                     | 0                          | 1,448        | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    |                             |                          |                       |                            |              | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 21,792                      | 41,563                   | 0                     | 0                          | 5,046        | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 1,923                       | 0                        | 0                     | 0                          | 0            | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 21,448                      | 55,528                   | 0                     | 0                          | 6,742        | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 11,828                      | 103,366                  | 0                     | 4,282                      | 12,550       | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 8,844                       | 92,870                   | 0                     | 1,568                      | 11,275       | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 6,359                       | 62,357                   | 0                     | 0                          | 7,571        | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 17,576                      | 123,109                  | 0                     | 0                          | 14,947       | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 4,078                       | 20,322                   | 0                     | 0                          | 2,467        | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 67,282                      | 0                        | 0                     | 0                          | 0            | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 146,912                     | 0                        | 0                     | 0                          | 0            | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 293,184                     | 0                        | 0                     | 0                          | 0            | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                           | 0                        | 0                     | 0                          | 0            | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 6,584                       | 17,218                   | 0                     | 0                          | 2,090        | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 6,930                       | 53,268                   | 0                     | 0                          | 6,467        | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                             |                          |                       |                            |              |        |
| 90.00                                  | 09000 | CLINIC                                 | 143,206                     | 1,098,511                | 0                     | 0                          | 133,369      | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 37,679                      | 420,782                  | 0                     | 89,653                     | 51,087       | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   |                             |                          | 0                     | 0                          | 0            | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                           | 0                        | 0                     | 0                          | 0            | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                           | 0                        | 0                     | 0                          | 0            | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                             |                          |                       |                            |              |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                           | 0                        | 0                     | 0                          | 0            | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                           | 0                        | 0                     | 0                          | 0            | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                           | 0                        | 0                     | 0                          | 0            | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                             |                          |                       |                            |              |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 11,839                      | 13,567                   | 0                     | 0                          | 1,647        | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                           | 0                        | 0                     | 0                          | 0            | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 3,837                       | 4,189                    | 0                     | 0                          | 509          | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                           | 0                        | 0                     | 0                          | 0            | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 545                         | 33                       | 0                     | 0                          | 4            | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                           | 0                        | 0                     | 0                          | 0            | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               |                             |                          |                       |                            |              | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 2,054,518                   | 12,551,939               | 0                     | 359,306                    | 1,462,372    | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                             |                          |                       |                            |              |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 8,159                       | 310,065                  | 0                     | 8,603                      | 37,645       | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 20,355                      | 0                        | 0                     | 0                          | 0            | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 4,375                       | 0                        | 0                     | 0                          | 0            | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 110,582                     | 1,250,882                | 0                     | 0                          | 151,868      | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 81,855                      | 84,443                   | 0                     | 0                          | 10,252       | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 49,716                      | 200,896                  | 0                     | 0                          | 24,391       | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 544,420                     | 2,314,723                | 0                     | 0                          | 281,026      | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 49,141                      | 205,077                  | 0                     | 0                          | 24,898       | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 102,551                     | 62,233                   | 0                     | 0                          | 7,556        | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 4,861                       | 221,210                  | 0                     | 0                          | 26,857       | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 66,319                      | 0                        | 0                     | 0                          | 0            | 194.03 |
| 194.04                                 | 07954 | CON - GNE                              | 381                         | 0                        | 0                     | 0                          | 0            | 194.04 |
| 200.00                                 |       | Cross Foot Adjustments                 |                             |                          |                       |                            |              | 200.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                                   | CORPORATE<br>ADMINISTRATION | MAINTENANCE &<br>REPAIRS | RENTED SPACE<br>COSTS | LAUNDRY &<br>LINEN SERVICE | HOUSEKEEPING |        |
|-------------------------|-----------------------------------|-----------------------------|--------------------------|-----------------------|----------------------------|--------------|--------|
|                         |                                   | 5.11                        | 6.00                     | 6.01                  | 8.00                       | 9.00         |        |
| 201.00                  | Negative Cost Centers             | 0                           | 0                        | 0                     | 0                          | 0            | 201.00 |
| 202.00                  | TOTAL (sum lines 118 through 201) | 3,097,233                   | 17,201,468               | 0                     | 367,909                    | 2,026,865    | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | DIETARY | PATIENT FOOD SERVICE | CAFETERIA | NURSING ADMINISTRATION | CENTRAL SERVICES & SUPPLY |       |
|------------------------------|-------|--------------------------------------|---------|----------------------|-----------|------------------------|---------------------------|-------|
|                              |       |                                      | 10.00   | 10.01                | 11.00     | 13.00                  | 14.00                     |       |
| GENERAL SERVICE COST CENTERS |       |                                      |         |                      |           |                        |                           |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |         |                      |           |                        |                           | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |         |                      |           |                        |                           | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |         |                      |           |                        |                           | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |         |                      |           |                        |                           | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |         |                      |           |                        |                           | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |         |                      |           |                        |                           | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |         |                      |           |                        |                           | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |         |                      |           |                        |                           | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |         |                      |           |                        |                           | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |         |                      |           |                        |                           | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |         |                      |           |                        |                           | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |         |                      |           |                        |                           | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |         |                      |           |                        |                           | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |         |                      |           |                        |                           | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |         |                      |           |                        |                           | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |         |                      |           |                        |                           | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |         |                      |           |                        |                           | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |         |                      |           |                        |                           | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |         |                      |           |                        |                           | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |         |                      |           |                        |                           | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |         |                      |           |                        |                           | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |         |                      |           |                        |                           | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |         |                      |           |                        |                           | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |         |                      |           |                        |                           | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |         |                      |           |                        |                           | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |         |                      |           |                        |                           | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |         |                      |           |                        |                           | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |         |                      |           |                        |                           | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |         |                      |           |                        |                           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |         |                      |           |                        |                           | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |         |                      |           |                        |                           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |         |                      |           |                        |                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |         |                      |           |                        |                           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |         |                      |           |                        |                           | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |         |                      |           |                        |                           | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |         |                      |           |                        |                           | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |         |                      |           |                        |                           | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |         |                      |           |                        |                           | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |         |                      |           |                        |                           | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |         |                      |           |                        |                           | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |         |                      |           |                        |                           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |         |                      |           |                        |                           | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |         |                      |           |                        |                           | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 121,749 |                      |           |                        |                           | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 97,484  | 1,374,396            |           |                        |                           | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 24,265  | 0                    | 1,343,256 |                        |                           | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0       | 0                    | 19,633    | 663,195                |                           | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0       | 0                    | 0         | 0                      | 1,724,037                 | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0       | 0                    | 26,163    | 0                      | 3,355                     | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0       | 0                    | 13,196    | 0                      | 0                         | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0       | 0                    | 26,654    | 0                      | 2                         | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0       | 0                    | 377       | 0                      | 0                         | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0       | 0                    | 209       | 0                      | 13                        | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0       | 0                    | 2,296     | 0                      | 0                         | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0       | 0                    | 3,643     | 0                      | 51                        | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0       | 0                    | 480       | 0                      | 0                         | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0       | 0                    | 286       | 0                      | 1                         | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0       | 0                    | 166       | 0                      | 0                         | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0       | 0                    | 0         | 0                      | 0                         | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0       | 0                    | 2,425     | 0                      | 0                         | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0       | 0                    | 2,048     | 0                      | 1                         | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0       | 0                    | 6,135     | 0                      | 0                         | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0       | 0                    | 21,426    | 0                      | 541                       | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0       | 0                    | 26,477    | 0                      | 162                       | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0       | 0                    | 3,698     | 7,400                  | 0                         | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0       | 0                    | 0         | 0                      | 0                         | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0       | 0                    | 146,395   | 0                      | 454                       | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0       | 0                    | 8,729     | 0                      | 285                       | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0       | 0                    | 4,451     | 0                      | 0                         | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0       | 0                    | 725       | 0                      | 375                       | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0       | 0                    | 628       | 0                      | 0                         | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       | 0       | 0                    | 2,172     | 0                      | 0                         | 23.03 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | DIETARY | PATIENT FOOD SERVICE | CAFETERIA | NURSING ADMINISTRATION | CENTRAL SERVICES & SUPPLY |        |
|----------------------------------------|-------|----------------------------------------|---------|----------------------|-----------|------------------------|---------------------------|--------|
|                                        |       |                                        | 10.00   | 10.01                | 11.00     | 13.00                  | 14.00                     |        |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0       | 0                    | 1,947     | 0                      | 18                        | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0       | 0                    | 685       | 1,371                  | 0                         | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0       | 0                    | 1,858     | 0                      | 0                         | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0       | 0                    | 1,108     | 0                      | 0                         | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0       | 0                    | 387       | 0                      | 0                         | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0       | 0                    | 2,054     | 4,109                  | 0                         | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0       | 0                    | 784       | 0                      | 3                         | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0       | 0                    | 1,426     | 0                      | 506                       | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |         |                      |           |                        |                           |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0       | 990,491              | 142,037   | 206,787                | 112,896                   | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0       | 101,150              | 36,069    | 62,254                 | 42,457                    | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0       | 106,462              | 36,898    | 60,460                 | 37,895                    | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0       | 27,780               | 12,157    | 20,954                 | 15,478                    | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0       | 0                    | 25,464    | 46,989                 | 18,068                    | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0       | 64,111               | 12,173    | 13,981                 | 360                       | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0       | 84,402               | 10,564    | 13,606                 | 3,687                     | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0       | 0                    | 4,068     | 8,138                  | 0                         | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |         |                      |           |                        |                           |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0       | 0                    | 43,154    | 53,886                 | 645,546                   | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0       | 0                    | 11,290    | 19,484                 | 5,180                     | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0       | 0                    | 11,283    | 17,367                 | 12,490                    | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0       | 0                    | 3,523     | 0                      | 46,838                    | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0       | 0                    | 33,445    | 6,467                  | 83,892                    | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0       | 0                    | 6,879     | 0                      | 3,494                     | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0       | 0                    | 1,514     | 0                      | 763                       | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0       | 0                    | 64,041    | 16,672                 | 61,358                    | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0       | 0                    | 1,169     | 0                      | 0                         | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0       | 0                    | 0         | 0                      | 0                         | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0       | 0                    | 5,189     | 1,446                  | 4,266                     | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0       | 0                    | 0         | 0                      | 39                        | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0       | 0                    | 13,818    | 0                      | 28,319                    | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0       | 0                    | 10,420    | 0                      | 2,028                     | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0       | 0                    | 7,671     | 0                      | 1,613                     | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0       | 0                    | 4,998     | 0                      | 4,463                     | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0       | 0                    | 11,776    | 9,458                  | 143,298                   | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0       | 0                    | 3,856     | 0                      | 2,346                     | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0       | 0                    | 0         | 0                      | 7,395                     | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0       | 0                    | 0         | 0                      | 0                         | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0       | 0                    | 0         | 0                      | 0                         | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0       | 0                    | 0         | 0                      | 0                         | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0       | 0                    | 0         | 0                      | 1,809                     | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0       | 0                    | 7,523     | 399                    | 374                       | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |         |                      |           |                        |                           |        |
| 90.00                                  | 09000 | CLINIC                                 | 0       | 0                    | 78,299    | 50,667                 | 45,673                    | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0       | 0                    | 26,625    | 38,424                 | 22,421                    | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0       | 0                    | 0         | 0                      | 0                         | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0       | 0                    | 0         | 0                      | 0                         | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0       | 0                    | 0         | 0                      | 0                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |         |                      |           |                        |                           |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0       | 0                    | 0         | 0                      | 0                         | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0       | 0                    | 0         | 0                      | 0                         | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0       | 0                    | 0         | 0                      | 0                         | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |         |                      |           |                        |                           |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0       | 0                    | 3,373     | 2,070                  | 0                         | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0       | 0                    | 0         | 0                      | 0                         | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0       | 0                    | 1,341     | 786                    | 0                         | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0       | 0                    | 0         | 0                      | 0                         | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0       | 0                    | 89        | 20                     | 0                         | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0       | 0                    | 0         | 0                      | 0                         | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0       | 0                    | 0         | 0                      | 0                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 121,749 | 1,374,396            | 959,367   | 663,195                | 1,360,213                 | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |         |                      |           |                        |                           |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0       | 0                    | 2,251     | 0                      | 0                         | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0       | 0                    | 13,214    | 0                      | 0                         | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0       | 0                    | 4,048     | 0                      | 20                        | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0       | 0                    | 56,182    | 0                      | 0                         | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0       | 0                    | 55,187    | 0                      | 0                         | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0       | 0                    | 3,791     | 0                      | 3,398                     | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0       | 0                    | 198,912   | 0                      | 63,304                    | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0       | 0                    | 21,975    | 0                      | 0                         | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0       | 0                    | 9,962     | 0                      | 6,036                     | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    | 0       | 0                    | 4,794     | 0                      | 0                         | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              | 0       | 0                    | 13,247    | 0                      | 291,065                   | 194.03 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

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11/24/2019 4:22 pm

| Cost Center Description |       |                                   | DIETARY | PATIENT FOOD<br>SERVICE | CAFETERIA | NURSING<br>ADMINISTRATION | CENTRAL<br>SERVICES &<br>SUPPLY |        |
|-------------------------|-------|-----------------------------------|---------|-------------------------|-----------|---------------------------|---------------------------------|--------|
|                         |       |                                   | 10.00   | 10.01                   | 11.00     | 13.00                     | 14.00                           |        |
| 194.04                  | 07954 | CON - GNE                         | 0       | 0                       | 326       | 0                         | 0                               | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |         |                         |           |                           |                                 | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0       | 0                       | 0         | 0                         | 0                               | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 121,749 | 1,374,396               | 1,343,256 | 663,195                   | 1,724,037                       | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

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| Cost Center Description      |       | PHARMACY                             | MEDICAL<br>RECORDS &<br>LIBRARY | MEDICAL<br>RECORDS &<br>LIBRARY | OTHER GENERAL SERVICE     |                           |       |
|------------------------------|-------|--------------------------------------|---------------------------------|---------------------------------|---------------------------|---------------------------|-------|
|                              |       |                                      |                                 |                                 | CLINICAL LAB<br>ADMIN MED | CLINICAL LAB<br>ADMIN PED |       |
|                              |       |                                      |                                 |                                 | 15.00                     | 16.00                     |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                 |                                 |                           |                           |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                 |                                 |                           |                           | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                 |                                 |                           |                           | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                 |                                 |                           |                           | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                 |                                 |                           |                           | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                 |                                 |                           |                           | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                 |                                 |                           |                           | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                 |                                 |                           |                           | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                 |                                 |                           |                           | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                 |                                 |                           |                           | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                 |                                 |                           |                           | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                                 |                                 |                           |                           | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                                 |                                 |                           |                           | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                                 |                                 |                           |                           | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                                 |                                 |                           |                           | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                                 |                                 |                           |                           | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                                 |                                 |                           |                           | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                                 |                                 |                           |                           | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                                 |                                 |                           |                           | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                 |                                 |                           |                           | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                 |                                 |                           |                           | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                                 |                                 |                           |                           | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                                 |                                 |                           |                           | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                                 |                                 |                           |                           | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                                 |                                 |                           |                           | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                                 |                                 |                           |                           | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                                 |                                 |                           |                           | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                                 |                                 |                           |                           | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                                 |                                 |                           |                           | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                                 |                                 |                           |                           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                                 |                                 |                           |                           | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                                 |                                 |                           |                           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                                 |                                 |                           |                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                                 |                                 |                           |                           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                                 |                                 |                           |                           | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                                 |                                 |                           |                           | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                                 |                                 |                           |                           | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                                 |                                 |                           |                           | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                                 |                                 |                           |                           | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                                 |                                 |                           |                           | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                                 |                                 |                           |                           | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                                 |                                 |                           |                           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                                 |                                 |                           |                           | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                                 |                                 |                           |                           | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                                 |                                 |                           |                           | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                                 |                                 |                           |                           | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                                 |                                 |                           |                           | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                                 |                                 |                           |                           | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                                 |                                 |                           |                           | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 883,320                         |                                 |                           |                           | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                               | 409,611                         |                           |                           | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 1                               | 226,105                         | 635,881                   |                           | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                               | 0                               | 0                         | 1,560                     | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               | 0                               | 0                               | 0                         | 0                         | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                               | 0                               | 0                         | 0                         | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                               | 0                               | 0                         | 0                         | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                               | 0                               | 0                         | 0                         | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                               | 0                               | 0                         | 0                         | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                               | 0                               | 0                         | 0                         | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                               | 0                               | 0                         | 0                         | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                               | 0                               | 0                         | 0                         | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                               | 0                               | 0                         | 0                         | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                               | 0                               | 0                         | 0                         | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 94                              | 0                               | 0                         | 0                         | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                               | 0                               | 0                         | 0                         | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                               | 0                               | 0                         | 0                         | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                               | 0                               | 0                         | 0                         | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                               | 0                               | 0                         | 0                         | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 1                               | 0                               | 0                         | 0                         | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                               | 0                               | 0                         | 0                         | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                               | 0                               | 0                         | 0                         | 23.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

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| Cost Center Description                |       |                                        | PHARMACY | MEDICAL<br>RECORDS &<br>LIBRARY | MEDICAL<br>RECORDS &<br>LIBRARY | OTHER GENERAL SERVICE     |                           |        |
|----------------------------------------|-------|----------------------------------------|----------|---------------------------------|---------------------------------|---------------------------|---------------------------|--------|
|                                        |       |                                        |          |                                 |                                 | CLINICAL LAB<br>ADMIN MED | CLINICAL LAB<br>ADMIN PED |        |
|                                        |       |                                        | 15.00    | 16.00                           | 16.01                           | 18.00                     | 18.01                     |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0        | 0                               | 0                               | 0                         | 0                         | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0        | 0                               | 0                               | 0                         | 0                         | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0        | 0                               | 0                               | 0                         | 0                         | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0        | 0                               | 0                               | 0                         | 0                         | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0        | 0                               | 0                               | 0                         | 0                         | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0        | 0                               | 0                               | 0                         | 0                         | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0        | 0                               | 0                               | 0                         | 0                         | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0        | 0                               | 0                               | 0                         | 0                         | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0        | 0                               | 0                               | 0                         | 0                         | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0        | 0                               | 0                               | 0                         | 0                         | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |          |                                 |                                 |                           |                           |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 30       | 0                               | 76,538                          | 0                         | 5,433                     | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0        | 0                               | 23,281                          | 0                         | 0                         | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0        | 0                               | 23,627                          | 0                         | 0                         | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 1        | 0                               | 6,587                           | 0                         | 8,160                     | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0        | 0                               | 18,600                          | 0                         | 12                        | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0        | 0                               | 4,838                           | 0                         | 0                         | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0        | 0                               | 6,343                           | 0                         | 0                         | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0        | 0                               | 1,559                           | 0                         | 0                         | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |          |                                 |                                 |                           |                           |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 43       | 0                               | 72,961                          | 0                         | 0                         | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0        | 0                               | 5,725                           | 0                         | 0                         | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0        | 0                               | 6,909                           | 0                         | 0                         | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 703      | 0                               | 19,440                          | 0                         | 0                         | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 318      | 0                               | 48,896                          | 0                         | 0                         | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 5        | 0                               | 1,550                           | 0                         | 0                         | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 33       | 0                               | 1,381                           | 0                         | 0                         | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 199      | 0                               | 66,917                          | 238                       | 1,178                     | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0        | 0                               | 101                             | 0                         | 0                         | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0        | 0                               | 0                               | 0                         | 0                         | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 150      | 0                               | 11,739                          | 111                       | 0                         | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0        | 0                               | 11,662                          | 0                         | 0                         | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 13       | 0                               | 13,710                          | 359                       | 0                         | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0        | 0                               | 5,878                           | 141                       | 0                         | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0        | 0                               | 5,122                           | 0                         | 0                         | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0        | 0                               | 2,315                           | 0                         | 0                         | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0        | 0                               | 17,503                          | 0                         | 0                         | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0        | 0                               | 5,235                           | 0                         | 0                         | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0        | 0                               | 24,301                          | 0                         | 0                         | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0        | 0                               | 57,607                          | 0                         | 0                         | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 674,085  | 0                               | 71,070                          | 0                         | 0                         | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0        | 0                               | 0                               | 0                         | 0                         | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0        | 0                               | 4,120                           | 0                         | 0                         | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0        | 0                               | 0                               | 0                         | 0                         | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |          |                                 |                                 |                           |                           |        |
| 90.00                                  | 09000 | CLINIC                                 | 149,092  | 0                               | 349                             | 20                        | 0                         | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0        | 183,506                         | 14,866                          | 691                       | 0                         | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0        | 0                               | 0                               | 0                         | 0                         | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0        | 0                               | 0                               | 0                         | 0                         | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0        | 0                               | 0                               | 0                         | 0                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |          |                                 |                                 |                           |                           |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0        | 0                               | 0                               | 0                         | 0                         | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0        | 0                               | 0                               | 0                         | 0                         | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0        | 0                               | 0                               | 0                         | 0                         | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |          |                                 |                                 |                           |                           |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0        | 0                               | 4,196                           | 0                         | 0                         | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0        | 0                               | 0                               | 0                         | 0                         | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0        | 0                               | 829                             | 0                         | 0                         | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0        | 0                               | 0                               | 0                         | 0                         | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0        | 0                               | 126                             | 0                         | 0                         | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0        | 0                               | 0                               | 0                         | 0                         | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0        | 0                               | 0                               | 0                         | 0                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 824,768  | 409,611                         | 635,881                         | 1,560                     | 14,783                    | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |          |                                 |                                 |                           |                           |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0        | 0                               | 0                               | 0                         | 0                         | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0        | 0                               | 0                               | 0                         | 0                         | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0        | 0                               | 0                               | 0                         | 0                         | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0        | 0                               | 0                               | 0                         | 0                         | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0        | 0                               | 0                               | 0                         | 0                         | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 1,414    | 0                               | 0                               | 0                         | 0                         | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 46,670   | 0                               | 0                               | 0                         | 0                         | 192.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | PHARMACY | MEDICAL<br>RECORDS &<br>LIBRARY | MEDICAL<br>RECORDS &<br>LIBRARY | OTHER GENERAL SERVICE     |                           |        |
|-------------------------|-------|-----------------------------------|----------|---------------------------------|---------------------------------|---------------------------|---------------------------|--------|
|                         |       |                                   |          |                                 |                                 | CLINICAL LAB<br>ADMIN MED | CLINICAL LAB<br>ADMIN PED |        |
|                         |       |                                   | 15.00    | 16.00                           | 16.01                           | 18.00                     | 18.01                     |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                   | 0        | 0                               | 0                               | 0                         | 0                         | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           | 10,468   | 0                               | 0                               | 0                         | 0                         | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0        | 0                               | 0                               | 0                         | 0                         | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0        | 0                               | 0                               | 0                         | 0                         | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0        | 0                               | 0                               | 0                         | 0                         | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |          |                                 |                                 |                           |                           | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0        | 0                               | 0                               | 0                         | 0                         | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 883,320  | 409,611                         | 635,881                         | 1,560                     | 14,783                    | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | OTHER GENERAL SERVICE    |                            |                             |                            |                            |       |
|------------------------------|-------|--------------------------------------|--------------------------|----------------------------|-----------------------------|----------------------------|----------------------------|-------|
|                              |       |                                      | CLINICAL LAB<br>ADMIN OB | CLINICAL LAB<br>ADMIN SURG | CLINICAL LAB<br>ADMIN PSYCH | CLINICAL LAB<br>ADMIN PATH | CLINICAL LAB<br>ADMIN CARD |       |
|                              |       |                                      | 18.02                    | 18.03                      | 18.04                       | 18.05                      | 18.06                      |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                          |                            |                             |                            |                            |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                          |                            |                             |                            |                            | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                          |                            |                             |                            |                            | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                          |                            |                             |                            |                            | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                          |                            |                             |                            |                            | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                          |                            |                             |                            |                            | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                          |                            |                             |                            |                            | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                          |                            |                             |                            |                            | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                          |                            |                             |                            |                            | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                          |                            |                             |                            |                            | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                          |                            |                             |                            |                            | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                          |                            |                             |                            |                            | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                          |                            |                             |                            |                            | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                          |                            |                             |                            |                            | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                          |                            |                             |                            |                            | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                          |                            |                             |                            |                            | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                          |                            |                             |                            |                            | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                          |                            |                             |                            |                            | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                          |                            |                             |                            |                            | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                          |                            |                             |                            |                            | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                          |                            |                             |                            |                            | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                          |                            |                             |                            |                            | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                          |                            |                             |                            |                            | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                          |                            |                             |                            |                            | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                          |                            |                             |                            |                            | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                          |                            |                             |                            |                            | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                          |                            |                             |                            |                            | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                          |                            |                             |                            |                            | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                          |                            |                             |                            |                            | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                          |                            |                             |                            |                            | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                          |                            |                             |                            |                            | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                          |                            |                             |                            |                            | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                          |                            |                             |                            |                            | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                          |                            |                             |                            |                            | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                          |                            |                             |                            |                            | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                          |                            |                             |                            |                            | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                          |                            |                             |                            |                            | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                          |                            |                             |                            |                            | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                          |                            |                             |                            |                            | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                          |                            |                             |                            |                            | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                          |                            |                             |                            |                            | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                          |                            |                             |                            |                            | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                          |                            |                             |                            |                            | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                          |                            |                             |                            |                            | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                          |                            |                             |                            |                            | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                          |                            |                             |                            |                            | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                          |                            |                             |                            |                            | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                          |                            |                             |                            |                            | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                          |                            |                             |                            |                            | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                          |                            |                             |                            |                            | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                          |                            |                             |                            |                            | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                          |                            |                             |                            |                            | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                          |                            |                             |                            |                            | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                          |                            |                             |                            |                            | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 266,560                  |                            |                             |                            |                            | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                        | 215,450                    |                             |                            |                            | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                        | 0                          | 66,711                      |                            |                            | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                        | 0                          | 0                           | 625,434                    |                            | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                        | 0                          | 0                           | 0                          | 3,119                      | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                        | 0                          | 0                           | 0                          | 0                          | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                        | 0                          | 0                           | 0                          | 0                          | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                        | 0                          | 0                           | 0                          | 0                          | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                        | 0                          | 0                           | 0                          | 0                          | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                        | 0                          | 0                           | 0                          | 0                          | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                        | 0                          | 0                           | 0                          | 0                          | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                        | 6,844                      | 0                           | 0                          | 0                          | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                        | 0                          | 0                           | 0                          | 0                          | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                        | 0                          | 0                           | 0                          | 0                          | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                        | 0                          | 0                           | 0                          | 0                          | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                        | 0                          | 0                           | 0                          | 0                          | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                        | 0                          | 0                           | 0                          | 0                          | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                        | 0                          | 0                           | 0                          | 0                          | 23.02 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
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Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | OTHER GENERAL SERVICE    |                            |                             |                            |                            |        |
|----------------------------------------|-------|----------------------------------------|--------------------------|----------------------------|-----------------------------|----------------------------|----------------------------|--------|
|                                        |       |                                        | CLINICAL LAB<br>ADMIN OB | CLINICAL LAB<br>ADMIN SURG | CLINICAL LAB<br>ADMIN PSYCH | CLINICAL LAB<br>ADMIN PATH | CLINICAL LAB<br>ADMIN CARD |        |
|                                        |       |                                        | 18.02                    | 18.03                      | 18.04                       | 18.05                      | 18.06                      |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                        | 0                          | 0                           | 0                          | 0                          | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                        | 0                          | 0                           | 0                          | 0                          | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                        | 0                          | 0                           | 0                          | 0                          | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                        | 0                          | 0                           | 0                          | 0                          | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                        | 0                          | 0                           | 0                          | 0                          | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                        | 0                          | 0                           | 0                          | 0                          | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                        | 0                          | 0                           | 0                          | 0                          | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                        | 0                          | 0                           | 0                          | 0                          | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                        | 0                          | 0                           | 0                          | 0                          | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                          |                            |                             |                            |                            |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 36,957                   | 0                          | 0                           | 0                          | 0                          | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                        | 0                          | 0                           | 0                          | 0                          | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                        | 0                          | 0                           | 0                          | 0                          | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                        | 0                          | 0                           | 0                          | 0                          | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 139,799                  | 0                          | 0                           | 0                          | 0                          | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                        | 0                          | 0                           | 0                          | 0                          | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                        | 0                          | 0                           | 0                          | 0                          | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 22,345                   | 0                          | 0                           | 0                          | 0                          | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                          |                            |                             |                            |                            |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                        | 79,861                     | 0                           | 0                          | 0                          | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                        | 20,894                     | 0                           | 0                          | 0                          | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 61,981                   | 0                          | 0                           | 0                          | 0                          | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                        | 6,519                      | 0                           | 0                          | 0                          | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                        | 61,893                     | 0                           | 0                          | 0                          | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                        | 12,731                     | 0                           | 0                          | 0                          | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                        | 2,803                      | 0                           | 0                          | 0                          | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 5,478                    | 6,965                      | 0                           | 625,434                    | 929                        | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                        | 0                          | 0                           | 0                          | 0                          | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                        | 0                          | 0                           | 0                          | 0                          | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                        | 0                          | 0                           | 0                          | 0                          | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                        | 0                          | 0                           | 0                          | 0                          | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                        | 0                          | 0                           | 0                          | 0                          | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                        | 0                          | 0                           | 0                          | 0                          | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                        | 0                          | 9,952                       | 0                          | 0                          | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                        | 8,054                      | 0                           | 0                          | 0                          | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                        | 0                          | 0                           | 0                          | 2,190                      | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                        | 0                          | 0                           | 0                          | 0                          | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                        | 0                          | 0                           | 0                          | 0                          | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                        | 0                          | 0                           | 0                          | 0                          | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                        | 0                          | 0                           | 0                          | 0                          | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                        | 0                          | 0                           | 0                          | 0                          | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                        | 0                          | 0                           | 0                          | 0                          | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                        | 0                          | 1,028                       | 0                          | 0                          | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                          |                            |                             |                            |                            |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                        | 0                          | 55,731                      | 0                          | 0                          | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                        | 0                          | 0                           | 0                          | 0                          | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                        | 0                          | 0                           | 0                          | 0                          | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                        | 0                          | 0                           | 0                          | 0                          | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                        | 0                          | 0                           | 0                          | 0                          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                          |                            |                             |                            |                            |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                        | 0                          | 0                           | 0                          | 0                          | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                        | 0                          | 0                           | 0                          | 0                          | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                        | 0                          | 0                           | 0                          | 0                          | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                          |                            |                             |                            |                            |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                        | 6,241                      | 0                           | 0                          | 0                          | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                        | 0                          | 0                           | 0                          | 0                          | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                        | 2,481                      | 0                           | 0                          | 0                          | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                        | 0                          | 0                           | 0                          | 0                          | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                        | 164                        | 0                           | 0                          | 0                          | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                        | 0                          | 0                           | 0                          | 0                          | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                        | 0                          | 0                           | 0                          | 0                          | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 266,560                  | 215,450                    | 66,711                      | 625,434                    | 3,119                      | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                          |                            |                             |                            |                            |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                        | 0                          | 0                           | 0                          | 0                          | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                        | 0                          | 0                           | 0                          | 0                          | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                        | 0                          | 0                           | 0                          | 0                          | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                        | 0                          | 0                           | 0                          | 0                          | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                        | 0                          | 0                           | 0                          | 0                          | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                        | 0                          | 0                           | 0                          | 0                          | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                        | 0                          | 0                           | 0                          | 0                          | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                        | 0                          | 0                           | 0                          | 0                          | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                        | 0                          | 0                           | 0                          | 0                          | 194.01 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | OTHER GENERAL SERVICE    |                            |                             |                            |                            |          |
|-------------------------|-------|-----------------------------------|--------------------------|----------------------------|-----------------------------|----------------------------|----------------------------|----------|
|                         |       |                                   | CLINICAL LAB<br>ADMIN OB | CLINICAL LAB<br>ADMIN SURG | CLINICAL LAB<br>ADMIN PSYCH | CLINICAL LAB<br>ADMIN PATH | CLINICAL LAB<br>ADMIN CARD |          |
|                         |       |                                   | 18.02                    | 18.03                      | 18.04                       | 18.05                      | 18.06                      |          |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                        | 0                          | 0                           | 0                          | 0                          | 0 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                        | 0                          | 0                           | 0                          | 0                          | 0 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                        | 0                          | 0                           | 0                          | 0                          | 0 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                          |                            |                             |                            |                            | 200.00   |
| 201.00                  |       | Negative Cost Centers             | 0                        | 0                          | 11,357                      | 0                          | 0                          | 0 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 266,560                  | 215,450                    | 78,068                      | 625,434                    | 3,119                      | 202.00   |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | OTHER GENERAL SERVICE       |                            |                            |                             |                                   |       |
|------------------------------|-------|--------------------------------------|-----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------------|-------|
|                              |       |                                      | CLINICAL LAB<br>ADMIN HEMAT | CLINICAL LAB<br>ADMIN NEUR | CLINICAL LAB<br>ADMIN OCLS | DISCRETIONARY<br>OPERATIONS | RUSH<br>UNIVERSITY<br>ADMIN SPLIT |       |
|                              |       |                                      | 18.07                       | 18.08                      | 18.09                      | 18.12                       | 18.14                             |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                             |                            |                            |                             |                                   |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                             |                            |                            |                             |                                   | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                             |                            |                            |                             |                                   | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                             |                            |                            |                             |                                   | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                             |                            |                            |                             |                                   | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                             |                            |                            |                             |                                   | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                             |                            |                            |                             |                                   | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                             |                            |                            |                             |                                   | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                             |                            |                            |                             |                                   | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                             |                            |                            |                             |                                   | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                             |                            |                            |                             |                                   | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                             |                            |                            |                             |                                   | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                             |                            |                            |                             |                                   | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                             |                            |                            |                             |                                   | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                             |                            |                            |                             |                                   | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                             |                            |                            |                             |                                   | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                             |                            |                            |                             |                                   | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                             |                            |                            |                             |                                   | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                             |                            |                            |                             |                                   | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                             |                            |                            |                             |                                   | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                             |                            |                            |                             |                                   | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                             |                            |                            |                             |                                   | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                             |                            |                            |                             |                                   | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                             |                            |                            |                             |                                   | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                             |                            |                            |                             |                                   | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                             |                            |                            |                             |                                   | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                             |                            |                            |                             |                                   | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                             |                            |                            |                             |                                   | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                             |                            |                            |                             |                                   | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                             |                            |                            |                             |                                   | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                             |                            |                            |                             |                                   | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                             |                            |                            |                             |                                   | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                             |                            |                            |                             |                                   | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                             |                            |                            |                             |                                   | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                             |                            |                            |                             |                                   | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                             |                            |                            |                             |                                   | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                             |                            |                            |                             |                                   | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                             |                            |                            |                             |                                   | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                             |                            |                            |                             |                                   | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                             |                            |                            |                             |                                   | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                             |                            |                            |                             |                                   | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                             |                            |                            |                             |                                   | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                             |                            |                            |                             |                                   | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                             |                            |                            |                             |                                   | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                             |                            |                            |                             |                                   | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                             |                            |                            |                             |                                   | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                             |                            |                            |                             |                                   | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                             |                            |                            |                             |                                   | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                             |                            |                            |                             |                                   | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                             |                            |                            |                             |                                   | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                             |                            |                            |                             |                                   | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                             |                            |                            |                             |                                   | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                             |                            |                            |                             |                                   | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                             |                            |                            |                             |                                   | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                             |                            |                            |                             |                                   | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              |                             |                            |                            |                             |                                   | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             |                             |                            |                            |                             |                                   | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              |                             |                            |                            |                             |                                   | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              |                             |                            |                            |                             |                                   | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                           |                            |                            |                             |                                   | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                           | 23,737                     |                            |                             |                                   | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                           | 0                          | 55,638                     |                             |                                   | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                           | 0                          | 0                          | 169,083                     |                                   | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                           | 0                          | 0                          | 0                           | 3,335,464                         | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                           | 0                          | 0                          | 0                           | 1,346,606                         | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                           | 0                          | 0                          | 0                           | 0                                 | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                           | 0                          | 0                          | 0                           | 0                                 | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                           | 0                          | 0                          | 0                           | 0                                 | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                           | 0                          | 0                          | 0                           | 0                                 | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                           | 0                          | 0                          | 0                           | 78,699                            | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                           | 0                          | 0                          | 0                           | 71,323                            | 23.01 |

## ALLOCATION OF CAPITAL RELATED COSTS

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| Cost Center Description                |       |                                        | OTHER GENERAL SERVICE       |                            |                            |                             |                                   |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------------|--------|
|                                        |       |                                        | CLINICAL LAB<br>ADMIN HEMAT | CLINICAL LAB<br>ADMIN NEUR | CLINICAL LAB<br>ADMIN OCLS | DISCRETIONARY<br>OPERATIONS | RUSH<br>UNIVERSITY<br>ADMIN SPLIT |        |
|                                        |       |                                        | 18.07                       | 18.08                      | 18.09                      | 18.12                       | 18.14                             |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                           | 0                          | 0                          | 0                           | 56,121                            | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                           | 0                          | 0                          | 0                           | 194,480                           | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                           | 0                          | 0                          | 0                           | 144,290                           | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                           | 0                          | 0                          | 0                           | 0                                 | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                           | 0                          | 0                          | 0                           | 0                                 | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                           | 0                          | 0                          | 0                           | 120,167                           | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                           | 0                          | 0                          | 0                           | 43,760                            | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                           | 0                          | 0                          | 0                           | 0                                 | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                           | 0                          | 0                          | 0                           | 48,146                            | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                           | 0                          | 0                          | 0                           | 189,595                           | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                             |                            |                            |                             |                                   |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                           | 0                          | 0                          | 0                           | 0                                 | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                           | 0                          | 0                          | 0                           | 0                                 | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                           | 0                          | 0                          | 0                           | 0                                 | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                           | 0                          | 0                          | 0                           | 0                                 | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                           | 0                          | 0                          | 0                           | 0                                 | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                           | 0                          | 0                          | 0                           | 0                                 | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                             |                            |                            |                             |                                   |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                           | 2,411                      | 0                          | 0                           | 0                                 | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                           | 0                          | 0                          | 0                           | 0                                 | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                           | 0                          | 0                          | 0                           | 0                                 | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                           | 0                          | 0                          | 0                           | 0                                 | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                           | 0                          | 0                          | 0                           | 0                                 | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                           | 0                          | 0                          | 0                           | 0                                 | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                           | 0                          | 0                          | 0                           | 0                                 | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                           | 0                          | 48,018                     | 0                           | 0                                 | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                           | 0                          | 1,625                      | 0                           | 0                                 | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                           | 0                          | 0                          | 0                           | 0                                 | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                           | 0                          | 5,995                      | 0                           | 0                                 | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                           | 0                          | 0                          | 0                           | 0                                 | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                           | 0                          | 0                          | 0                           | 0                                 | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                           | 0                          | 0                          | 0                           | 0                                 | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                           | 0                          | 0                          | 0                           | 0                                 | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                           | 0                          | 0                          | 0                           | 0                                 | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                           | 3,952                      | 0                          | 0                           | 0                                 | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                           | 0                          | 0                          | 0                           | 0                                 | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                           | 0                          | 0                          | 0                           | 0                                 | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                           | 0                          | 0                          | 0                           | 0                                 | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                           | 0                          | 0                          | 0                           | 0                                 | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                           | 0                          | 0                          | 0                           | 0                                 | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                           | 0                          | 0                          | 0                           | 0                                 | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                             |                            |                            |                             |                                   |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                           | 17,374                     | 0                          | 0                           | 0                                 | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                           | 0                          | 0                          | 0                           | 0                                 | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                           | 0                          | 0                          | 0                           | 0                                 | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                           | 0                          | 0                          | 0                           | 0                                 | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                             |                            |                            |                             |                                   |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                           | 0                          | 0                          | 0                           | 0                                 | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                           | 0                          | 0                          | 0                           | 0                                 | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                           | 0                          | 0                          | 0                           | 0                                 | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                             |                            |                            |                             |                                   |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                           | 0                          | 0                          | 0                           | 0                                 | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                           | 0                          | 0                          | 0                           | 0                                 | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                           | 0                          | 0                          | 0                           | 0                                 | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                           | 0                          | 0                          | 0                           | 0                                 | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                           | 0                          | 0                          | 0                           | 0                                 | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                           | 0                          | 0                          | 0                           | 0                                 | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                           | 23,737                     | 55,638                     | 0                           | 2,293,187                         | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                             |                            |                            |                             |                                   |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                           | 0                          | 0                          | 0                           | 183,266                           | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                           | 0                          | 0                          | 0                           | 0                                 | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                           | 0                          | 0                          | 0                           | 0                                 | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                           | 0                          | 0                          | 0                           | 0                                 | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                           | 0                          | 0                          | 0                           | 0                                 | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                           | 0                          | 0                          | 0                           | 0                                 | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                           | 0                          | 0                          | 0                           | 0                                 | 192.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | OTHER GENERAL SERVICE       |                            |                            |                             |                                   |        |
|-------------------------|-------|-----------------------------------|-----------------------------|----------------------------|----------------------------|-----------------------------|-----------------------------------|--------|
|                         |       |                                   | CLINICAL LAB<br>ADMIN HEMAT | CLINICAL LAB<br>ADMIN NEUR | CLINICAL LAB<br>ADMIN OCLS | DISCRETIONARY<br>OPERATIONS | RUSH<br>UNIVERSITY<br>ADMIN SPLIT |        |
|                         |       |                                   | 18.07                       | 18.08                      | 18.09                      | 18.12                       | 18.14                             |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                   | 0                           | 0                          | 0                          | 0                           | 859,011                           | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           | 0                           | 0                          | 0                          | 0                           | 0                                 | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                           | 0                          | 0                          | 0                           | 0                                 | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                           | 0                          | 0                          | 0                           | 0                                 | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                           | 0                          | 0                          | 0                           | 0                                 | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                             |                            |                            |                             |                                   | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                           | 0                          | 0                          | 169,083                     | 0                                 | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 0                           | 23,737                     | 55,638                     | 169,083                     | 3,335,464                         | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | OTHER GENERAL<br>SERVICE | NONPHYSICIAN<br>ANESTHETISTS | NURSING SCHOOL | INTERNS & RESIDENTS           |                              |       |
|------------------------------|-------|--------------------------------------|--------------------------|------------------------------|----------------|-------------------------------|------------------------------|-------|
|                              |       |                                      | NURSING SCHOOL<br>SPLIT  |                              |                | SERVICES-SALAR<br>Y & FRINGES | SERVICES-OTHER<br>PRGM COSTS |       |
|                              |       |                                      | 18.16                    |                              |                | 21.00                         | 22.00                        |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                          |                              |                |                               |                              |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                          |                              |                |                               |                              | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                          |                              |                |                               |                              | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                          |                              |                |                               |                              | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                          |                              |                |                               |                              | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                          |                              |                |                               |                              | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                          |                              |                |                               |                              | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                          |                              |                |                               |                              | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                          |                              |                |                               |                              | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                          |                              |                |                               |                              | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                          |                              |                |                               |                              | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                          |                              |                |                               |                              | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                          |                              |                |                               |                              | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                          |                              |                |                               |                              | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                          |                              |                |                               |                              | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                          |                              |                |                               |                              | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                          |                              |                |                               |                              | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                          |                              |                |                               |                              | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                          |                              |                |                               |                              | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                          |                              |                |                               |                              | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                          |                              |                |                               |                              | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                          |                              |                |                               |                              | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                          |                              |                |                               |                              | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                          |                              |                |                               |                              | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                          |                              |                |                               |                              | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                          |                              |                |                               |                              | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                          |                              |                |                               |                              | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                          |                              |                |                               |                              | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                          |                              |                |                               |                              | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                          |                              |                |                               |                              | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                          |                              |                |                               |                              | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                          |                              |                |                               |                              | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                          |                              |                |                               |                              | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                          |                              |                |                               |                              | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                          |                              |                |                               |                              | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                          |                              |                |                               |                              | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                          |                              |                |                               |                              | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                          |                              |                |                               |                              | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                          |                              |                |                               |                              | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                          |                              |                |                               |                              | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                          |                              |                |                               |                              | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                          |                              |                |                               |                              | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                          |                              |                |                               |                              | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                          |                              |                |                               |                              | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                          |                              |                |                               |                              | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                          |                              |                |                               |                              | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                          |                              |                |                               |                              | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                          |                              |                |                               |                              | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                          |                              |                |                               |                              | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                          |                              |                |                               |                              | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                          |                              |                |                               |                              | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                          |                              |                |                               |                              | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                          |                              |                |                               |                              | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                          |                              |                |                               |                              | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                          |                              |                |                               |                              | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              |                          |                              |                |                               |                              | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             |                          |                              |                |                               |                              | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              |                          |                              |                |                               |                              | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              |                          |                              |                |                               |                              | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             |                          |                              |                |                               |                              | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              |                          |                              |                |                               |                              | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              |                          |                              |                |                               |                              | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             |                          |                              |                |                               |                              | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          |                          |                              |                |                               |                              | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 1,941,521                |                              |                |                               |                              | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                        | 21,390                       |                |                               |                              | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 1,744,651                |                              | 484,872        |                               |                              | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                        |                              |                | 1,189,317                     |                              | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                        |                              |                |                               | 690,535                      | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                        |                              |                |                               |                              | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                        |                              |                |                               |                              | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      | 0                        |                              |                |                               |                              | 23.02 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | OTHER GENERAL<br>SERVICE | NONPHYSICIAN<br>ANESTHETISTS | NURSING SCHOOL | INTERNS & RESIDENTS           |                              |        |
|----------------------------------------|-------|----------------------------------------|--------------------------|------------------------------|----------------|-------------------------------|------------------------------|--------|
|                                        |       |                                        | NURSING SCHOOL<br>SPLIT  |                              |                | SERVICES-SALAR<br>Y & FRINGES | SERVICES-OTHER<br>PRGM COSTS |        |
|                                        |       |                                        | 18.16                    |                              |                | 21.00                         | 22.00                        |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                        |                              |                |                               |                              | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                        |                              |                |                               |                              | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                        |                              |                |                               |                              | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                        |                              |                |                               |                              | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                        |                              |                |                               |                              | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                        |                              |                |                               |                              | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                        |                              |                |                               |                              | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                        |                              |                |                               |                              | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                        |                              |                |                               |                              | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                          |                              |                |                               |                              |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                        |                              |                |                               |                              | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                        |                              |                |                               |                              | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                        |                              |                |                               |                              | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                        |                              |                |                               |                              | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                        |                              |                |                               |                              | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                        |                              |                |                               |                              | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                        |                              |                |                               |                              | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                        |                              |                |                               |                              | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                          |                              |                |                               |                              |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                        |                              |                |                               |                              | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                        |                              |                |                               |                              | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                        |                              |                |                               |                              | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                        |                              |                |                               |                              | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                        |                              |                |                               |                              | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                        |                              |                |                               |                              | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                        |                              |                |                               |                              | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                        |                              |                |                               |                              | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                        |                              |                |                               |                              | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                        |                              |                |                               |                              | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                        |                              |                |                               |                              | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                        |                              |                |                               |                              | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                        |                              |                |                               |                              | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                        |                              |                |                               |                              | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                        |                              |                |                               |                              | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                        |                              |                |                               |                              | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                        |                              |                |                               |                              | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                        |                              |                |                               |                              | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                        |                              |                |                               |                              | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                        |                              |                |                               |                              | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                        |                              |                |                               |                              | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                        |                              |                |                               |                              | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                        |                              |                |                               |                              | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                        |                              |                |                               |                              | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                          |                              |                |                               |                              |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                        |                              |                |                               |                              | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                        |                              |                |                               |                              | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                        |                              |                |                               |                              | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                        |                              |                |                               |                              | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                        |                              |                |                               |                              | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                          |                              |                |                               |                              |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                        |                              |                |                               |                              | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                        |                              |                |                               |                              | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                        |                              |                |                               |                              | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                          |                              |                |                               |                              |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                        |                              |                |                               |                              | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                        |                              |                |                               |                              | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                        |                              |                |                               |                              | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                        |                              |                |                               |                              | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                        |                              |                |                               |                              | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                        |                              |                |                               |                              | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                        |                              |                |                               |                              | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 1,744,651                | 0                            | 0              | 0                             | 0                            | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                          |                              |                |                               |                              |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 196,870                  |                              |                |                               |                              | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                        |                              |                |                               |                              | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                        |                              |                |                               |                              | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                        |                              |                |                               |                              | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                        |                              |                |                               |                              | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                        |                              |                |                               |                              | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                        |                              |                |                               |                              | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 0                        |                              |                |                               |                              | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 0                        |                              |                |                               |                              | 194.01 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | OTHER GENERAL<br>SERVICE | NONPHYSICIAN<br>ANESTHETISTS | NURSING SCHOOL | INTERNS & RESIDENTS           |                              |        |
|-------------------------|-------|-----------------------------------|--------------------------|------------------------------|----------------|-------------------------------|------------------------------|--------|
|                         |       |                                   | NURSING SCHOOL<br>SPLIT  |                              |                | SERVICES-SALAR<br>Y & FRINGES | SERVICES-OTHER<br>PRGM COSTS |        |
|                         |       |                                   | 18.16                    |                              |                | 21.00                         | 22.00                        |        |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               | 0                        |                              |                |                               |                              | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         | 0                        |                              |                |                               |                              | 194.03 |
| 194.04                  | 07954 | CON - GNE                         | 0                        |                              |                |                               |                              | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            |                          | 21,390                       | 484,872        | 1,189,317                     | 690,535                      | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                        | 0                            | 1,259,779      | 0                             | 0                            | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 1,941,521                | 21,390                       | 1,744,651      | 1,189,317                     | 690,535                      | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | PARAMED HEALTH<br>SYSTEM<br>MANAGEMENT | PARAMED<br>MEDICAL<br>PERFUSION TECH | PARAMED<br>DIETARY | PARAMED SPEECH | PARAMED<br>OCCUPATIONAL<br>THERAPY |       |
|------------------------------|-------|--------------------------------------|----------------------------------------|--------------------------------------|--------------------|----------------|------------------------------------|-------|
|                              |       |                                      | 23.00                                  | 23.01                                | 23.02              | 23.03          | 23.04                              |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                        |                                      |                    |                |                                    |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                        |                                      |                    |                |                                    | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                        |                                      |                    |                |                                    | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                        |                                      |                    |                |                                    | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                        |                                      |                    |                |                                    | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                        |                                      |                    |                |                                    | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                        |                                      |                    |                |                                    | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                        |                                      |                    |                |                                    | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                        |                                      |                    |                |                                    | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                        |                                      |                    |                |                                    | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                        |                                      |                    |                |                                    | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                                        |                                      |                    |                |                                    | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                                        |                                      |                    |                |                                    | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                                        |                                      |                    |                |                                    | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                                        |                                      |                    |                |                                    | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                                        |                                      |                    |                |                                    | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                                        |                                      |                    |                |                                    | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                                        |                                      |                    |                |                                    | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                                        |                                      |                    |                |                                    | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                        |                                      |                    |                |                                    | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                        |                                      |                    |                |                                    | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                                        |                                      |                    |                |                                    | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                                        |                                      |                    |                |                                    | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                                        |                                      |                    |                |                                    | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                                        |                                      |                    |                |                                    | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                                        |                                      |                    |                |                                    | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                                        |                                      |                    |                |                                    | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                                        |                                      |                    |                |                                    | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                                        |                                      |                    |                |                                    | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                                        |                                      |                    |                |                                    | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                                        |                                      |                    |                |                                    | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                                        |                                      |                    |                |                                    | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                                        |                                      |                    |                |                                    | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                                        |                                      |                    |                |                                    | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                                        |                                      |                    |                |                                    | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                                        |                                      |                    |                |                                    | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                                        |                                      |                    |                |                                    | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                                        |                                      |                    |                |                                    | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                                        |                                      |                    |                |                                    | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                                        |                                      |                    |                |                                    | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                                        |                                      |                    |                |                                    | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                                        |                                      |                    |                |                                    | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                                        |                                      |                    |                |                                    | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                                        |                                      |                    |                |                                    | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                                        |                                      |                    |                |                                    | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                                        |                                      |                    |                |                                    | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                                        |                                      |                    |                |                                    | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                                        |                                      |                    |                |                                    | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                                        |                                      |                    |                |                                    | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                                        |                                      |                    |                |                                    | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                                        |                                      |                    |                |                                    | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                                        |                                      |                    |                |                                    | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                                        |                                      |                    |                |                                    | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                                        |                                      |                    |                |                                    | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                                        |                                      |                    |                |                                    | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              |                                        |                                      |                    |                |                                    | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             |                                        |                                      |                    |                |                                    | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              |                                        |                                      |                    |                |                                    | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              |                                        |                                      |                    |                |                                    | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             |                                        |                                      |                    |                |                                    | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              |                                        |                                      |                    |                |                                    | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              |                                        |                                      |                    |                |                                    | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             |                                        |                                      |                    |                |                                    | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          |                                        |                                      |                    |                |                                    | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 |                                        |                                      |                    |                |                                    | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            |                                        |                                      |                    |                |                                    | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       |                                        |                                      |                    |                |                                    | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD |                                        |                                      |                    |                |                                    | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD |                                        |                                      |                    |                |                                    | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 188,004                                |                                      |                    |                |                                    | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       |                                        | 27,687                               |                    |                |                                    | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      |                                        |                                      | 84,657             |                |                                    | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       |                                        |                                      |                    | 316,762        |                                    | 23.03 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PARAMED HEALTH<br>SYSTEM<br>MANAGEMENT | PARAMED<br>MEDICAL<br>PERFUSION TECH | PARAMED<br>DIETARY | PARAMED SPEECH | PARAMED<br>OCCUPATIONAL<br>THERAPY |        |
|----------------------------------------|-------|----------------------------------------|----------------------------------------|--------------------------------------|--------------------|----------------|------------------------------------|--------|
|                                        |       |                                        | 23.00                                  | 23.01                                | 23.02              | 23.03          | 23.04                              |        |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           |                                        |                                      |                    |                | 15,296                             | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                |                                        |                                      |                    |                |                                    | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  |                                        |                                      |                    |                |                                    | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     |                                        |                                      |                    |                |                                    | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            |                                        |                                      |                    |                |                                    | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       |                                        |                                      |                    |                |                                    | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            |                                        |                                      |                    |                |                                    | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           |                                        |                                      |                    |                |                                    | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                        |                                      |                    |                |                                    |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    |                                        |                                      |                    |                |                                    | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           |                                        |                                      |                    |                |                                    | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            |                                        |                                      |                    |                |                                    | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          |                                        |                                      |                    |                |                                    | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          |                                        |                                      |                    |                |                                    | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      |                                        |                                      |                    |                |                                    | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      |                                        |                                      |                    |                |                                    | 41.00  |
| 43.00                                  | 04300 | NURSERY                                |                                        |                                      |                    |                |                                    | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                        |                                      |                    |                |                                    |        |
| 50.00                                  | 05000 | OPERATING ROOM                         |                                        |                                      |                    |                |                                    | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          |                                        |                                      |                    |                |                                    | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             |                                        |                                      |                    |                |                                    | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         |                                        |                                      |                    |                |                                    | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   |                                        |                                      |                    |                |                                    | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  |                                        |                                      |                    |                |                                    | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           |                                        |                                      |                    |                |                                    | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             |                                        |                                      |                    |                |                                    | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       |                                        |                                      |                    |                |                                    | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    |                                        |                                      |                    |                |                                    | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   |                                        |                                      |                    |                |                                    | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    |                                        |                                      |                    |                |                                    | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    |                                        |                                      |                    |                |                                    | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       |                                        |                                      |                    |                |                                    | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   |                                        |                                      |                    |                |                                    | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       |                                        |                                      |                    |                |                                    | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      |                                        |                                      |                    |                |                                    | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 |                                        |                                      |                    |                |                                    | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   |                                        |                                      |                    |                |                                    | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         |                                        |                                      |                    |                |                                    | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              |                                        |                                      |                    |                |                                    | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         |                                        |                                      |                    |                |                                    | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   |                                        |                                      |                    |                |                                    | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     |                                        |                                      |                    |                |                                    | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                        |                                      |                    |                |                                    |        |
| 90.00                                  | 09000 | CLINIC                                 |                                        |                                      |                    |                |                                    | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              |                                        |                                      |                    |                |                                    | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   |                                        |                                      |                    |                |                                    | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       |                                        |                                      |                    |                |                                    | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      |                                        |                                      |                    |                |                                    | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                        |                                      |                    |                |                                    |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  |                                        |                                      |                    |                |                                    | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        |                                        |                                      |                    |                |                                    | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           |                                        |                                      |                    |                |                                    | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                        |                                      |                    |                |                                    |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     |                                        |                                      |                    |                |                                    | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      |                                        |                                      |                    |                |                                    | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      |                                        |                                      |                    |                |                                    | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       |                                        |                                      |                    |                |                                    | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   |                                        |                                      |                    |                |                                    | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      |                                        |                                      |                    |                |                                    | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               |                                        |                                      |                    |                |                                    | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                                      | 0                                    | 0                  | 0              | 0                                  | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                        |                                      |                    |                |                                    |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    |                                        |                                      |                    |                |                                    | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           |                                        |                                      |                    |                |                                    | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        |                                        |                                      |                    |                |                                    | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               |                                        |                                      |                    |                |                                    | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    |                                        |                                      |                    |                |                                    | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         |                                        |                                      |                    |                |                                    | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            |                                        |                                      |                    |                |                                    | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        |                                        |                                      |                    |                |                                    | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                |                                        |                                      |                    |                |                                    | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    |                                        |                                      |                    |                |                                    | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              |                                        |                                      |                    |                |                                    | 194.03 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | PARAMED HEALTH<br>SYSTEM<br>MANAGEMENT<br>23.00 | PARAMED<br>MEDICAL<br>PERFUSION TECH<br>23.01 | PARAMED<br>DIETARY<br>23.02 | PARAMED SPEECH<br>23.03 | PARAMED<br>OCCUPATIONAL<br>THERAPY<br>23.04 |        |
|-------------------------|-------|-----------------------------------|-------------------------------------------------|-----------------------------------------------|-----------------------------|-------------------------|---------------------------------------------|--------|
| 194.04                  | 07954 | CON - GNE                         |                                                 |                                               |                             |                         |                                             | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            | 188,004                                         | 27,687                                        | 0                           | 0                       | 15,296                                      | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 54,051                                          | 53,428                                        | 84,657                      | 316,762                 | 190,000                                     | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 242,055                                         | 81,115                                        | 84,657                      | 316,762                 | 205,296                                     | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | PARAMED<br>MEDICAL<br>PHYSICS | PARAMED<br>PASTORAL CARE | PARAMED<br>TECHNOLOGY | PARAMED<br>VASCULAR<br>ULTRASOUND | PARAMED<br>PHARMACY |       |
|------------------------------|-------|--------------------------------------|-------------------------------|--------------------------|-----------------------|-----------------------------------|---------------------|-------|
|                              |       |                                      | 23.05                         | 23.06                    | 23.07                 | 23.08                             | 23.09               |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                               |                          |                       |                                   |                     |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                               |                          |                       |                                   |                     | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                               |                          |                       |                                   |                     | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                               |                          |                       |                                   |                     | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                               |                          |                       |                                   |                     | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                               |                          |                       |                                   |                     | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                               |                          |                       |                                   |                     | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                               |                          |                       |                                   |                     | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                               |                          |                       |                                   |                     | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                               |                          |                       |                                   |                     | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                               |                          |                       |                                   |                     | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                               |                          |                       |                                   |                     | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                               |                          |                       |                                   |                     | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                               |                          |                       |                                   |                     | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                               |                          |                       |                                   |                     | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                               |                          |                       |                                   |                     | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                               |                          |                       |                                   |                     | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                               |                          |                       |                                   |                     | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                               |                          |                       |                                   |                     | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                               |                          |                       |                                   |                     | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                               |                          |                       |                                   |                     | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                               |                          |                       |                                   |                     | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                               |                          |                       |                                   |                     | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                               |                          |                       |                                   |                     | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                               |                          |                       |                                   |                     | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                               |                          |                       |                                   |                     | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                               |                          |                       |                                   |                     | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                               |                          |                       |                                   |                     | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                               |                          |                       |                                   |                     | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                               |                          |                       |                                   |                     | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                               |                          |                       |                                   |                     | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                               |                          |                       |                                   |                     | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                               |                          |                       |                                   |                     | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                               |                          |                       |                                   |                     | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                               |                          |                       |                                   |                     | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                               |                          |                       |                                   |                     | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                               |                          |                       |                                   |                     | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                               |                          |                       |                                   |                     | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                               |                          |                       |                                   |                     | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                               |                          |                       |                                   |                     | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                               |                          |                       |                                   |                     | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                               |                          |                       |                                   |                     | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                               |                          |                       |                                   |                     | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                               |                          |                       |                                   |                     | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                               |                          |                       |                                   |                     | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                               |                          |                       |                                   |                     | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                               |                          |                       |                                   |                     | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                               |                          |                       |                                   |                     | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                               |                          |                       |                                   |                     | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                               |                          |                       |                                   |                     | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                               |                          |                       |                                   |                     | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                               |                          |                       |                                   |                     | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                               |                          |                       |                                   |                     | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                               |                          |                       |                                   |                     | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                               |                          |                       |                                   |                     | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              |                               |                          |                       |                                   |                     | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             |                               |                          |                       |                                   |                     | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              |                               |                          |                       |                                   |                     | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              |                               |                          |                       |                                   |                     | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             |                               |                          |                       |                                   |                     | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              |                               |                          |                       |                                   |                     | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              |                               |                          |                       |                                   |                     | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             |                               |                          |                       |                                   |                     | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          |                               |                          |                       |                                   |                     | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 |                               |                          |                       |                                   |                     | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            |                               |                          |                       |                                   |                     | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       |                               |                          |                       |                                   |                     | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD |                               |                          |                       |                                   |                     | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD |                               |                          |                       |                                   |                     | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     |                               |                          |                       |                                   |                     | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       |                               |                          |                       |                                   |                     | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                      |                               |                          |                       |                                   |                     | 23.02 |
| 23.03                        | 02303 | PARAMED SPEECH                       |                               |                          |                       |                                   |                     | 23.03 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PARAMED<br>MEDICAL<br>PHYSICS | PARAMED<br>PASTORAL CARE | PARAMED<br>TECHNOLOGY | PARAMED<br>VASCULAR<br>ULTRASOUND | PARAMED<br>PHARMACY |        |
|----------------------------------------|-------|----------------------------------------|-------------------------------|--------------------------|-----------------------|-----------------------------------|---------------------|--------|
|                                        |       |                                        | 23.05                         | 23.06                    | 23.07                 | 23.08                             | 23.09               |        |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           |                               |                          |                       |                                   |                     | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 29,285                        |                          |                       |                                   |                     | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  |                               | 98,663                   |                       |                                   |                     | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     |                               |                          | 23,133                |                                   |                     | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            |                               |                          |                       | 11,064                            |                     | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       |                               |                          |                       |                                   | 15,925              | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            |                               |                          |                       |                                   |                     | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           |                               |                          |                       |                                   |                     | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                               |                          |                       |                                   |                     |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    |                               |                          |                       |                                   |                     | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           |                               |                          |                       |                                   |                     | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            |                               |                          |                       |                                   |                     | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          |                               |                          |                       |                                   |                     | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          |                               |                          |                       |                                   |                     | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      |                               |                          |                       |                                   |                     | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      |                               |                          |                       |                                   |                     | 41.00  |
| 43.00                                  | 04300 | NURSERY                                |                               |                          |                       |                                   |                     | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                               |                          |                       |                                   |                     |        |
| 50.00                                  | 05000 | OPERATING ROOM                         |                               |                          |                       |                                   |                     | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          |                               |                          |                       |                                   |                     | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             |                               |                          |                       |                                   |                     | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         |                               |                          |                       |                                   |                     | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   |                               |                          |                       |                                   |                     | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  |                               |                          |                       |                                   |                     | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           |                               |                          |                       |                                   |                     | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             |                               |                          |                       |                                   |                     | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       |                               |                          |                       |                                   |                     | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    |                               |                          |                       |                                   |                     | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   |                               |                          |                       |                                   |                     | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    |                               |                          |                       |                                   |                     | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    |                               |                          |                       |                                   |                     | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       |                               |                          |                       |                                   |                     | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   |                               |                          |                       |                                   |                     | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       |                               |                          |                       |                                   |                     | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      |                               |                          |                       |                                   |                     | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 |                               |                          |                       |                                   |                     | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   |                               |                          |                       |                                   |                     | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         |                               |                          |                       |                                   |                     | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              |                               |                          |                       |                                   |                     | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         |                               |                          |                       |                                   |                     | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   |                               |                          |                       |                                   |                     | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     |                               |                          |                       |                                   |                     | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                               |                          |                       |                                   |                     |        |
| 90.00                                  | 09000 | CLINIC                                 |                               |                          |                       |                                   |                     | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              |                               |                          |                       |                                   |                     | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   |                               |                          |                       |                                   |                     | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       |                               |                          |                       |                                   |                     | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      |                               |                          |                       |                                   |                     | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                               |                          |                       |                                   |                     |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  |                               |                          |                       |                                   |                     | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        |                               |                          |                       |                                   |                     | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           |                               |                          |                       |                                   |                     | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                               |                          |                       |                                   |                     |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     |                               |                          |                       |                                   |                     | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      |                               |                          |                       |                                   |                     | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      |                               |                          |                       |                                   |                     | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       |                               |                          |                       |                                   |                     | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   |                               |                          |                       |                                   |                     | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      |                               |                          |                       |                                   |                     | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               |                               |                          |                       |                                   |                     | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                             | 0                        | 0                     | 0                                 | 0                   | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                               |                          |                       |                                   |                     |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    |                               |                          |                       |                                   |                     | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           |                               |                          |                       |                                   |                     | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        |                               |                          |                       |                                   |                     | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               |                               |                          |                       |                                   |                     | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    |                               |                          |                       |                                   |                     | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         |                               |                          |                       |                                   |                     | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            |                               |                          |                       |                                   |                     | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        |                               |                          |                       |                                   |                     | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                |                               |                          |                       |                                   |                     | 194.01 |
| 194.02                                 | 07952 | AFFIL CORP ROOM 500                    |                               |                          |                       |                                   |                     | 194.02 |
| 194.03                                 | 07953 | AFFIL CORP JOINT VENTURES              |                               |                          |                       |                                   |                     | 194.03 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | PARAMED<br>MEDICAL<br>PHYSICS | PARAMED<br>PASTORAL CARE | PARAMED<br>TECHNOLOGY | PARAMED<br>VASCULAR<br>ULTRASOUND | PARAMED<br>PHARMACY |        |
|-------------------------|-------|-----------------------------------|-------------------------------|--------------------------|-----------------------|-----------------------------------|---------------------|--------|
|                         |       |                                   | 23.05                         | 23.06                    | 23.07                 | 23.08                             | 23.09               |        |
| 194.04                  | 07954 | CON - GNE                         |                               |                          |                       |                                   |                     | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            | 29,285                        | 98,663                   | 23,133                | 11,064                            | 15,925              | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                             | 0                        | 124,364               | 38,440                            | 0                   | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 29,285                        | 98,663                   | 147,497               | 49,504                            | 15,925              | 202.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | PARAMED<br>RESPIRATORY<br>THERAPY    | PARAMED<br>PHYSICIANS<br>ASSISTANT | Subtotal | Intern &<br>Residents Cost<br>& Post<br>Stepdown<br>Adjustments | Total |       |
|------------------------------|-------|--------------------------------------|------------------------------------|----------|-----------------------------------------------------------------|-------|-------|
|                              |       | 23.10                                | 23.11                              | 24.00    | 25.00                                                           | 26.00 |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                    |          |                                                                 |       |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                    |          |                                                                 |       | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                    |          |                                                                 |       | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                    |          |                                                                 |       | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                    |          |                                                                 |       | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                    |          |                                                                 |       | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                    |          |                                                                 |       | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                    |          |                                                                 |       | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                    |          |                                                                 |       | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                    |          |                                                                 |       | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                    |          |                                                                 |       | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                                    |          |                                                                 |       | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                                    |          |                                                                 |       | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                                    |          |                                                                 |       | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                                    |          |                                                                 |       | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                                    |          |                                                                 |       | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                                    |          |                                                                 |       | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                                    |          |                                                                 |       | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                                    |          |                                                                 |       | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                    |          |                                                                 |       | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                    |          |                                                                 |       | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                                    |          |                                                                 |       | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                                    |          |                                                                 |       | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                                    |          |                                                                 |       | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                                    |          |                                                                 |       | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                                    |          |                                                                 |       | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                                    |          |                                                                 |       | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                                    |          |                                                                 |       | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                                    |          |                                                                 |       | 4.00  |
| 5.01                         | 00500 | TRANSITION RECRUITMENT               |                                    |          |                                                                 |       | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                                    |          |                                                                 |       | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                                    |          |                                                                 |       | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                                    |          |                                                                 |       | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                                    |          |                                                                 |       | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                                    |          |                                                                 |       | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                                    |          |                                                                 |       | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                                    |          |                                                                 |       | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                                    |          |                                                                 |       | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                                    |          |                                                                 |       | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                                    |          |                                                                 |       | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                                    |          |                                                                 |       | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                                    |          |                                                                 |       | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                                    |          |                                                                 |       | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                                    |          |                                                                 |       | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                                    |          |                                                                 |       | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                                    |          |                                                                 |       | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                                    |          |                                                                 |       | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                                    |          |                                                                 |       | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                                    |          |                                                                 |       | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                                    |          |                                                                 |       | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                                    |          |                                                                 |       | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                                    |          |                                                                 |       | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                                    |          |                                                                 |       | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               |                                    |          |                                                                 |       | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                                    |          |                                                                 |       | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              |                                    |          |                                                                 |       | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             |                                    |          |                                                                 |       | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              |                                    |          |                                                                 |       | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              |                                    |          |                                                                 |       | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             |                                    |          |                                                                 |       | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              |                                    |          |                                                                 |       | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              |                                    |          |                                                                 |       | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             |                                    |          |                                                                 |       | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          |                                    |          |                                                                 |       | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 |                                    |          |                                                                 |       | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            |                                    |          |                                                                 |       | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       |                                    |          |                                                                 |       | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD |                                    |          |                                                                 |       | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD |                                    |          |                                                                 |       | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     |                                    |          |                                                                 |       | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       |                                    |          |                                                                 |       | 23.01 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PARAMED<br>RESPIRATORY<br>THERAPY | PARAMED<br>PHYSICIANS<br>ASSISTANT | Subtotal   | Intern &<br>Residents Cost<br>& Post<br>Stepdown<br>Adjustments | Total      |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------------|------------------------------------|------------|-----------------------------------------------------------------|------------|--------|
|                                        |       |                                        | 23.10                             | 23.11                              | 24.00      | 25.00                                                           | 26.00      |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        |                                   |                                    |            |                                                                 |            | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         |                                   |                                    |            |                                                                 |            | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           |                                   |                                    |            |                                                                 |            | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                |                                   |                                    |            |                                                                 |            | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  |                                   |                                    |            |                                                                 |            | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     |                                   |                                    |            |                                                                 |            | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            |                                   |                                    |            |                                                                 |            | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       |                                   |                                    |            |                                                                 |            | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 77,792                            |                                    |            |                                                                 |            | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           |                                   | 25,691                             |            |                                                                 |            | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                   |                                    |            |                                                                 |            |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    |                                   |                                    | 14,257,790 | 0                                                               | 14,257,790 | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           |                                   |                                    | 2,569,765  | 0                                                               | 2,569,765  | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            |                                   |                                    | 2,638,047  | 0                                                               | 2,638,047  | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          |                                   |                                    | 754,887    | 0                                                               | 754,887    | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          |                                   |                                    | 2,207,542  | 0                                                               | 2,207,542  | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      |                                   |                                    | 1,285,848  | 0                                                               | 1,285,848  | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      |                                   |                                    | 945,728    | 0                                                               | 945,728    | 41.00  |
| 43.00                                  | 04300 | NURSERY                                |                                   |                                    | 774,168    | 0                                                               | 774,168    | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                   |                                    |            |                                                                 |            |        |
| 50.00                                  | 05000 | OPERATING ROOM                         |                                   |                                    | 7,016,329  | 0                                                               | 7,016,329  | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          |                                   |                                    | 1,634,704  | 0                                                               | 1,634,704  | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             |                                   |                                    | 1,232,449  | 0                                                               | 1,232,449  | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         |                                   |                                    | 929,801    | 0                                                               | 929,801    | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   |                                   |                                    | 4,329,270  | 0                                                               | 4,329,270  | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  |                                   |                                    | 1,254,373  | 0                                                               | 1,254,373  | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           |                                   |                                    | 353,697    | 0                                                               | 353,697    | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             |                                   |                                    | 5,739,724  | 0                                                               | 5,739,724  | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       |                                   |                                    | 77,742     | 0                                                               | 77,742     | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    |                                   |                                    |            |                                                                 |            | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   |                                   |                                    | 332,265    | 0                                                               | 332,265    | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    |                                   |                                    | 47,052     | 0                                                               | 47,052     | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    |                                   |                                    | 454,390    | 0                                                               | 454,390    | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       |                                   |                                    | 542,923    | 0                                                               | 542,923    | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   |                                   |                                    | 459,388    | 0                                                               | 459,388    | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       |                                   |                                    | 267,533    | 0                                                               | 267,533    | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      |                                   |                                    | 1,042,551  | 0                                                               | 1,042,551  | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 |                                   |                                    | 161,971    | 0                                                               | 161,971    | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   |                                   |                                    | 194,381    | 0                                                               | 194,381    | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         |                                   |                                    | 410,924    | 0                                                               | 410,924    | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              |                                   |                                    | 1,645,659  | 0                                                               | 1,645,659  | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         |                                   |                                    | 0          | 0                                                               | 0          | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   |                                   |                                    | 124,680    | 0                                                               | 124,680    | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     |                                   |                                    | 381,427    | 0                                                               | 381,427    | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                   |                                    |            |                                                                 |            |        |
| 90.00                                  | 09000 | CLINIC                                 |                                   |                                    | 5,253,854  | 0                                                               | 5,253,854  | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              |                                   |                                    | 3,113,237  | 0                                                               | 3,113,237  | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   |                                   |                                    | 0          | 0                                                               | 0          | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       |                                   |                                    | 0          | 0                                                               | 0          | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      |                                   |                                    | 0          | 0                                                               | 0          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                   |                                    |            |                                                                 |            |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  |                                   |                                    | 0          | 0                                                               | 0          | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        |                                   |                                    | 0          | 0                                                               | 0          | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           |                                   |                                    | 0          | 0                                                               | 0          | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                   |                                    |            |                                                                 |            |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     |                                   |                                    | 93,007     | 0                                                               | 93,007     | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      |                                   |                                    | 0          | 0                                                               | 0          | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      |                                   |                                    | 28,364     | 0                                                               | 28,364     | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       |                                   |                                    | 0          | 0                                                               | 0          | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   |                                   |                                    | 1,451      | 0                                                               | 1,451      | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      |                                   |                                    | 0          | 0                                                               | 0          | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               |                                   |                                    | 0          | 0                                                               | 0          | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                                 | 0                                  | 62,556,921 | 0                                                               | 62,556,921 | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                   |                                    |            |                                                                 |            |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    |                                   |                                    | 1,884,081  | 0                                                               | 1,884,081  | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           |                                   |                                    | 38,202     | 0                                                               | 38,202     | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        |                                   |                                    | 115,559    | 0                                                               | 115,559    | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               |                                   |                                    | 8,155,892  | 0                                                               | 8,155,892  | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    |                                   |                                    | 736,384    | 0                                                               | 736,384    | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         |                                   |                                    | 1,618,074  | 0                                                               | 1,618,074  | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            |                                   |                                    | 12,514,602 | 0                                                               | 12,514,602 | 192.00 |

## ALLOCATION OF CAPITAL RELATED COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet B  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                   | PARAMED<br>RESPIRATORY<br>THERAPY | PARAMED<br>PHYSICIANS<br>ASSISTANT | Subtotal    | Intern &<br>Residents Cost<br>& Post<br>Stepdown<br>Adjustments | Total       |        |
|-------------------------|-------|-----------------------------------|-----------------------------------|------------------------------------|-------------|-----------------------------------------------------------------|-------------|--------|
|                         |       |                                   | 23.10                             | 23.11                              | 24.00       | 25.00                                                           | 26.00       |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                   |                                   |                                    | 1,734,385   | 0                                                               | 1,734,385   | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES           |                                   |                                    | 395,412     | 0                                                               | 395,412     | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500               |                                   |                                    | 913,043     | 0                                                               | 913,043     | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES         |                                   |                                    | 376,039     | 0                                                               | 376,039     | 194.03 |
| 194.04                  | 07954 | CON - GNE                         |                                   |                                    | 786         | 0                                                               | 786         | 194.04 |
| 200.00                  |       | Cross Foot Adjustments            | 77,792                            | 25,691                             | 2,898,654   | 0                                                               | 2,898,654   | 200.00 |
| 201.00                  |       | Negative Cost Centers             | 0                                 | 187,598                            | 6,921,000   | 0                                                               | 6,921,000   | 201.00 |
| 202.00                  |       | TOTAL (sum lines 118 through 201) | 77,792                            | 213,289                            | 100,859,034 | 0                                                               | 100,859,034 | 202.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS        |                                                               |                                                              |                                                             |                                                             |       |
|------------------------------|-------|--------------------------------------|------------------------------|---------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------|-------|
|                              |       |                                      | BLDG & FIXT<br>(SQUARE FEET) | DEPRECIATION<br>OLD HOSPITAL<br>(SQUARE FEET<br>OLD HOSPITAL) | DEPRECIATION<br>DIRECT BLDG<br>(PERCENT DEPR<br>DIRECT BLDG) | DEPRECIATION<br>KELLOGG PAV<br>(SQUARE FEET<br>KELLOGG PAV) | DEPRECIATION<br>JELKE SOUTH<br>(SQUARE FEET<br>JELKE SOUTH) |       |
|                              |       |                                      |                              |                                                               |                                                              |                                                             |                                                             |       |
|                              |       |                                      | 1.00                         | 1.01                                                          | 1.02                                                         | 1.03                                                        | 1.04                                                        |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                              |                                                               |                                                              |                                                             |                                                             |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            | 0                            |                                                               |                                                              |                                                             |                                                             | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            | 0                            | 76,749                                                        |                                                              |                                                             |                                                             | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             | 0                            | 0                                                             | 6,343,920                                                    |                                                             |                                                             | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             | 0                            | 0                                                             | 0                                                            | 203,663                                                     |                                                             | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             | 0                            | 0                                                             | 0                                                            | 0                                                           | 265,045                                                     | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                              |                                                               |                                                              |                                                             |                                                             | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                              |                                                               |                                                              |                                                             |                                                             | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                              |                                                               |                                                              |                                                             |                                                             | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                              |                                                               |                                                              |                                                             |                                                             | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                              |                                                               |                                                              |                                                             |                                                             | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                              |                                                               |                                                              |                                                             |                                                             | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                              |                                                               |                                                              |                                                             |                                                             | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                              |                                                               |                                                              |                                                             |                                                             | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                              |                                                               |                                                              |                                                             |                                                             | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0                            | 0                                                             | 4,410,694                                                    | 0                                                           | 0                                                           | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                            | 0                                                             | 0                                                            | 0                                                           | 854                                                         | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                            | 0                                                             | 0                                                            | 0                                                           | 4,451                                                       | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 0                            | 924                                                           | 0                                                            | 5,281                                                       | 6,956                                                       | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                            | 0                                                             | 0                                                            | 0                                                           | 3,550                                                       | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                            | 0                                                             | 0                                                            | 62                                                          | 357                                                         | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                            | 145                                                           | 0                                                            | 0                                                           | 7,356                                                       | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 0                            | 245                                                           | 453,982                                                      | 849                                                         | 2,006                                                       | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0                            | 31,616                                                        | 0                                                            | 37,267                                                      | 78,906                                                      | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                            | 739                                                           | 0                                                            | 253                                                         | 180                                                         | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0                            | 397                                                           | 0                                                            | 9,537                                                       | 372                                                         | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                            | 0                                                             | 0                                                            | 482                                                         | 0                                                           | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0                            | 0                                                             | 0                                                            | 0                                                           | 1,753                                                       | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                            | 1,272                                                         | 0                                                            | 6,012                                                       | 1,463                                                       | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                            | 2,967                                                         | 0                                                            | 514                                                         | 0                                                           | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                            | 665                                                           | 0                                                            | 0                                                           | 0                                                           | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                            | 1,317                                                         | 0                                                            | 380                                                         | 0                                                           | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                            | 265                                                           | 0                                                            | 0                                                           | 0                                                           | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                            | 3,936                                                         | 0                                                            | 1,377                                                       | 0                                                           | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                            | 0                                                             | 0                                                            | 0                                                           | 2,367                                                       | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                            | 0                                                             | 0                                                            | 0                                                           | 13,472                                                      | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                            | 0                                                             | 0                                                            | 0                                                           | 1,044                                                       | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                            | 2,116                                                         | 0                                                            | 440                                                         | 1,140                                                       | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                            | 0                                                             | 0                                                            | 16,709                                                      | 0                                                           | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                            | 0                                                             | 0                                                            | 10,643                                                      | 0                                                           | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                            | 3,134                                                         | 0                                                            | 4,806                                                       | 2,605                                                       | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS        |                                                               |                                                              |                                                             |                                                             |        |
|----------------------------------------|-------|----------------------------------------|------------------------------|---------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------|--------|
|                                        |       |                                        | BLDG & FIXT<br>(SQUARE FEET) | DEPRECIATION<br>OLD HOSPITAL<br>(SQUARE FEET<br>OLD HOSPITAL) | DEPRECIATION<br>DIRECT BLDG<br>(PERCENT DEPR<br>DIRECT BLDG) | DEPRECIATION<br>KELLOGG PAV<br>(SQUARE FEET<br>KELLOGG PAV) | DEPRECIATION<br>JELKE SOUTH<br>(SQUARE FEET<br>JELKE SOUTH) |        |
|                                        |       |                                        | 1.00                         | 1.01                                                          | 1.02                                                         | 1.03                                                        | 1.04                                                        |        |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                            | 0                                                             | 0                                                            | 973                                                         | 0                                                           | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                              |                                                               |                                                              |                                                             |                                                             |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                            | 3,965                                                         | 0                                                            | 25,181                                                      | 0                                                           | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                            | 0                                                             | 0                                                            | 11,728                                                      | 0                                                           | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                            | 0                                                             | 0                                                            | 18,568                                                      | 0                                                           | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 41.00  |
| 43.00                                  | 04300 | NURSEY                                 | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                              |                                                               |                                                              |                                                             |                                                             |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                            | 0                                                             | 0                                                            | 0                                                           | 3,825                                                       | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                            | 0                                                             | 0                                                            | 0                                                           | 7,033                                                       | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                            | 1,822                                                         | 0                                                            | 3,153                                                       | 7,563                                                       | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                            | 0                                                             | 0                                                            | 3,740                                                       | 479                                                         | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                            | 243                                                           | 0                                                            | 1,717                                                       | 31,086                                                      | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                            | 0                                                             | 0                                                            | 0                                                           | 1,441                                                       | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                            | 0                                                             | 0                                                            | 0                                                           | 1,573                                                       | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                            | 0                                                             | 0                                                            | 1,048                                                       | 0                                                           | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                            | 1,790                                                         | 0                                                            | 246                                                         | 0                                                           | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                            | 1,413                                                         | 0                                                            | 1,446                                                       | 0                                                           | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                            | 0                                                             | 0                                                            | 3,094                                                       | 0                                                           | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                            | 0                                                             | 0                                                            | 1,314                                                       | 0                                                           | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                              |                                                               |                                                              |                                                             |                                                             |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                            | 0                                                             | 0                                                            | 1,868                                                       | 519                                                         | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                            | 0                                                             | 0                                                            | 12,342                                                      | 0                                                           | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                              |                                                               |                                                              |                                                             |                                                             |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                              |                                                               |                                                              |                                                             |                                                             |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                            | 58,971                                                        | 4,864,676                                                    | 181,030                                                     | 182,351                                                     | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                              |                                                               |                                                              |                                                             |                                                             |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                            | 0                                                             | 77,036                                                       | 0                                                           | 0                                                           | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                            | 0                                                             | 1,402,208                                                    | 151                                                         | 61,909                                                      | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                            | 0                                                             | 0                                                            | 0                                                           | 807                                                         | 191.01 |

## COST ALLOCATION - STATISTICAL BASIS

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From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | CAPITAL RELATED COSTS        |                                                               |                                                              |                                                             |                                                             |        |
|-------------------------|-------|--------------------------------------------------------|------------------------------|---------------------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------------|-------------------------------------------------------------|--------|
|                         |       |                                                        | BLDG & FIXT<br>(SQUARE FEET) | DEPRECIATION<br>OLD HOSPITAL<br>(SQUARE FEET<br>OLD HOSPITAL) | DEPRECIATION<br>DIRECT BLDG<br>(PERCENT DEPR<br>DIRECT BLDG) | DEPRECIATION<br>KELLOGG PAV<br>(SQUARE FEET<br>KELLOGG PAV) | DEPRECIATION<br>JELKE SOUTH<br>(SQUARE FEET<br>JELKE SOUTH) |        |
|                         |       |                                                        | 1.00                         | 1.01                                                          | 1.02                                                         | 1.03                                                        | 1.04                                                        |        |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 0                            | 0                                                             | 0                                                            | 473                                                         | 8,445                                                       | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 0                            | 15,729                                                        | 0                                                            | 20,879                                                      | 9,360                                                       | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                            | 847                                                           | 0                                                            | 1,130                                                       | 2,173                                                       | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                            | 1,202                                                         | 0                                                            | 0                                                           | 0                                                           | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                            | 0                                                             | 0                                                            | 0                                                           | 0                                                           | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                              |                                                               |                                                              |                                                             |                                                             | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                              |                                                               |                                                              |                                                             |                                                             | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 0                            | 1,219,128                                                     | 6,343,920                                                    | 4,696,203                                                   | 5,496,718                                                   | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 0.000000                     | 15.884611                                                     | 1.000000                                                     | 23.058695                                                   | 20.738810                                                   | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            |                              |                                                               |                                                              |                                                             |                                                             | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                |                              |                                                               |                                                              |                                                             |                                                             | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                              |                                                               |                                                              |                                                             |                                                             | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                              |                                                               |                                                              |                                                             |                                                             | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

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| Cost Center Description |                              |                                      | CAPITAL RELATED COSTS                                     |                                                                |                                                                |                                                     |                                                                               |       |
|-------------------------|------------------------------|--------------------------------------|-----------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------------|-------|
|                         |                              |                                      | DEPRECIATION<br>ATRIUM PAV<br>(SQUARE FEET<br>ATRIUM PAV) | DEPRECIATION<br>PRO BLDG NORTH<br>(SQUARE FEET<br>PRO BLDG NO) | DEPRECIATION<br>PRO BLDG SOUTH<br>(SQUARE FEET<br>PRO BLDG SO) | DEPRECIATION<br>WOOD ST<br>(SQUARE FEET<br>WOOD ST) | DEPRECIATION<br>ACADEMIC<br>FACILITY<br>(SQUARE FEET<br>ACADEMIC<br>FACILITY) |       |
|                         |                              |                                      | 1.05                                                      | 1.06                                                           | 1.07                                                           | 1.08                                                | 1.09                                                                          |       |
|                         | GENERAL SERVICE COST CENTERS |                                      |                                                           |                                                                |                                                                |                                                     |                                                                               |       |
| 1.00                    | 00100                        | CAP REL COSTS-BLDG & FIXT            |                                                           |                                                                |                                                                |                                                     |                                                                               | 1.00  |
| 1.01                    | 00101                        | DEPRECIATION OLD HOSPITAL            |                                                           |                                                                |                                                                |                                                     |                                                                               | 1.01  |
| 1.02                    | 00102                        | DEPRECIATION DIRECT BLDG             |                                                           |                                                                |                                                                |                                                     |                                                                               | 1.02  |
| 1.03                    | 00103                        | DEPRECIATION KELLOGG PAV             |                                                           |                                                                |                                                                |                                                     |                                                                               | 1.03  |
| 1.04                    | 00104                        | DEPRECIATION JELKE SOUTH             |                                                           |                                                                |                                                                |                                                     |                                                                               | 1.04  |
| 1.05                    | 00105                        | DEPRECIATION ATRIUM PAV              | 324,019                                                   |                                                                |                                                                |                                                     |                                                                               | 1.05  |
| 1.06                    | 00106                        | DEPRECIATION PRO BLDG NORTH          | 0                                                         | 169,305                                                        |                                                                |                                                     |                                                                               | 1.06  |
| 1.07                    | 00107                        | DEPRECIATION PRO BLDG SOUTH          | 0                                                         | 0                                                              | 95,759                                                         |                                                     |                                                                               | 1.07  |
| 1.08                    | 00108                        | DEPRECIATION WOOD ST                 | 0                                                         | 0                                                              | 0                                                              | 24,475                                              |                                                                               | 1.08  |
| 1.09                    | 00109                        | DEPRECIATION ACADEMIC FACILITY       | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 278,066                                                                       | 1.09  |
| 1.10                    | 00110                        | DEPRECIATION PRO BLDG III            | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 1.10  |
| 1.11                    | 00111                        | DEPRECIATION JRB                     | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 1.11  |
| 1.12                    | 00112                        | DEPRECIATION TOB                     | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 1.12  |
| 1.13                    | 00113                        | DEPRECIATION EQUIPMENT               | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 1.13  |
| 1.14                    | 00114                        | DEPRECIATION ORTHOPEDICS             | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 1.14  |
| 1.15                    | 00115                        | DEPRECIATION KIDSTON                 | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 1.15  |
| 1.16                    | 00116                        | DEPRECIATION COHN                    | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 1.16  |
| 1.17                    | 00117                        | DEPRECIATION TOWER                   | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 1.17  |
| 2.00                    | 00200                        | CAP REL COSTS-MVBLE EQUIP            |                                                           |                                                                |                                                                |                                                     |                                                                               | 2.00  |
| 2.01                    | 00201                        | INTEREST GENERAL                     |                                                           |                                                                |                                                                |                                                     |                                                                               | 2.01  |
| 2.02                    | 00202                        | INTEREST DIRECT BLDG                 |                                                           |                                                                |                                                                |                                                     |                                                                               | 2.02  |
| 2.03                    | 00203                        | INTEREST ATRUM PAV                   |                                                           |                                                                |                                                                |                                                     |                                                                               | 2.03  |
| 2.04                    | 00204                        | INTEREST PRO BLDG SOUTH              |                                                           |                                                                |                                                                |                                                     |                                                                               | 2.04  |
| 2.05                    | 00205                        | INTEREST TOB                         |                                                           |                                                                |                                                                |                                                     |                                                                               | 2.05  |
| 2.06                    | 00206                        | INTEREST PRO BLDG III                |                                                           |                                                                |                                                                |                                                     |                                                                               | 2.06  |
| 2.07                    | 00207                        | INTEREST TOWER                       |                                                           |                                                                |                                                                |                                                     |                                                                               | 2.07  |
| 2.08                    | 00208                        | INTEREST PRO BLDG NORTH              |                                                           |                                                                |                                                                |                                                     |                                                                               | 2.08  |
| 4.00                    | 00400                        | EMPLOYEE BENEFITS DEPARTMENT         | 2,592                                                     | 0                                                              | 0                                                              | 0                                                   | 128                                                                           | 4.00  |
| 5.01                    | 00590                        | TRANSITION RECRUITMENT               | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 5.01  |
| 5.02                    | 00540                        | PARKING GARAGE                       | 0                                                         | 401                                                            | 0                                                              | 0                                                   | 0                                                                             | 5.02  |
| 5.03                    | 00591                        | RESEARCH ADMINISTRATION              | 0                                                         | 15                                                             | 0                                                              | 0                                                   | 161                                                                           | 5.03  |
| 5.04                    | 00592                        | ADMIN & GEN INPT SERVICE             | 852                                                       | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 5.04  |
| 5.05                    | 00593                        | ADMIN & GEN OUTPT SERVICE            | 2,754                                                     | 12                                                             | 0                                                              | 0                                                   | 0                                                                             | 5.05  |
| 5.06                    | 00594                        | ADMIN & GEN ANIMAL LAB               | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 433                                                                           | 5.06  |
| 5.07                    | 00595                        | ADMIN & GEN PT SERVICE               | 6,084                                                     | 473                                                            | 964                                                            | 0                                                   | 1,475                                                                         | 5.07  |
| 5.08                    | 00596                        | PERSONNEL DEPARTMENT                 | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 1,233                                                                         | 5.08  |
| 5.09                    | 00597                        | RESEARCH FACULTY                     | 0                                                         | 37                                                             | 217                                                            | 0                                                   | 0                                                                             | 5.09  |
| 5.10                    | 00598                        | RESEARCH SPA                         | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 540                                                                           | 5.10  |
| 5.11                    | 00560                        | CORPORATE ADMINISTRATION             | 3,221                                                     | 5                                                              | 0                                                              | 7,722                                               | 23,853                                                                        | 5.11  |
| 6.00                    | 00600                        | MAINTENANCE & REPAIRS                | 75,831                                                    | 17,537                                                         | 20,610                                                         | 4,271                                               | 66,580                                                                        | 6.00  |
| 6.01                    | 00601                        | RENTED SPACE COSTS                   | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 6.01  |
| 8.00                    | 00800                        | LAUNDRY & LINEN SERVICE              | 831                                                       | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 8.00  |
| 9.00                    | 00900                        | HOUSEKEEPING                         | 3,131                                                     | 205                                                            | 281                                                            | 108                                                 | 607                                                                           | 9.00  |
| 10.00                   | 01000                        | DIETARY                              | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 10.00 |
| 10.01                   | 01001                        | PATIENT FOOD SERVICE                 | 21,583                                                    | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 10.01 |
| 11.00                   | 01100                        | CAFETERIA                            | 5,113                                                     | 338                                                            | 0                                                              | 0                                                   | 23,602                                                                        | 11.00 |
| 13.00                   | 01300                        | NURSING ADMINISTRATION               | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 2,820                                                                         | 13.00 |
| 14.00                   | 01400                        | CENTRAL SERVICES & SUPPLY            | 4,734                                                     | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 14.00 |
| 15.00                   | 01500                        | PHARMACY                             | 11,049                                                    | 55                                                             | 0                                                              | 0                                                   | 0                                                                             | 15.00 |
| 16.00                   | 01600                        | MEDICAL RECORDS & LIBRARY            | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 1,248                                                                         | 16.00 |
| 16.01                   | 01601                        | MEDICAL RECORDS & LIBRARY            | 1,476                                                     | 55                                                             | 0                                                              | 0                                                   | 0                                                                             | 16.01 |
| 18.00                   | 01850                        | CLINICAL LAB ADMIN MED               | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 18.00 |
| 18.01                   | 01080                        | CLINICAL LAB ADMIN PED               | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 113                                                                           | 18.01 |
| 18.02                   | 01851                        | CLINICAL LAB ADMIN OB                | 0                                                         | 895                                                            | 0                                                              | 0                                                   | 0                                                                             | 18.02 |
| 18.03                   | 01852                        | CLINICAL LAB ADMIN SURG              | 1,088                                                     | 455                                                            | 0                                                              | 0                                                   | 0                                                                             | 18.03 |
| 18.04                   | 01853                        | CLINICAL LAB ADMIN PSYCH             | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 18.04 |
| 18.05                   | 01854                        | CLINICAL LAB ADMIN PATH              | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 18.05 |
| 18.06                   | 01855                        | CLINICAL LAB ADMIN CARD              | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 18.06 |
| 18.07                   | 01856                        | CLINICAL LAB ADMIN HEMAT             | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 18.07 |
| 18.08                   | 01857                        | CLINICAL LAB ADMIN NEUR              | 0                                                         | 293                                                            | 208                                                            | 0                                                   | 0                                                                             | 18.08 |
| 18.09                   | 01858                        | CLINICAL LAB ADMIN OCLS              | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 18.09 |
| 18.12                   | 01859                        | DISCRETIONARY OPERATIONS             | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 18.12 |
| 18.14                   | 01860                        | RUSH UNIVERSITY ADMIN SPLIT          | 0                                                         | 1,026                                                          | 78                                                             | 0                                                   | 78,319                                                                        | 18.14 |
| 18.16                   | 01861                        | NURSING SCHOOL SPLIT                 | 480                                                       | 0                                                              | 0                                                              | 0                                                   | 17,602                                                                        | 18.16 |
| 19.00                   | 01900                        | NONPHYSICIAN ANESTHETISTS            | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 19.00 |
| 20.00                   | 02000                        | NURSING SCHOOL                       | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 20.00 |
| 21.00                   | 02100                        | I&R SERVICES-SALARY & FRINGES APPRVD | 1,497                                                     | 0                                                              | 0                                                              | 0                                                   | 1,397                                                                         | 21.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       | CAPITAL RELATED COSTS                                     |                                                                |                                                                |                                                     |                                                                               |        |
|----------------------------------------|-------|-----------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------------|--------|
|                                        |       | DEPRECIATION<br>ATRIUM PAV<br>(SQUARE FEET<br>ATRIUM PAV) | DEPRECIATION<br>PRO BLDG NORTH<br>(SQUARE FEET<br>PRO BLDG NO) | DEPRECIATION<br>PRO BLDG SOUTH<br>(SQUARE FEET<br>PRO BLDG SO) | DEPRECIATION<br>WOOD ST<br>(SQUARE FEET<br>WOOD ST) | DEPRECIATION<br>ACADEMIC<br>FACILITY<br>(SQUARE FEET<br>ACADEMIC<br>FACILITY) |        |
|                                        |       | 1.05                                                      | 1.06                                                           | 1.07                                                           | 1.08                                                | 1.09                                                                          |        |
| 22.00                                  | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD                      | 0                                                              | 342                                                            | 1,081                                               | 0                                                                             | 22.00  |
| 23.00                                  | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT                          | 0                                                              | 224                                                            | 0                                                   | 3,449                                                                         | 23.00  |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH                            | 0                                                              | 0                                                              | 0                                                   | 296                                                                           | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                                           | 0                                                              | 0                                                              | 0                                                   | 976                                                                           | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                                            | 0                                                              | 629                                                            | 0                                                   | 1,945                                                                         | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY                              | 0                                                              | 220                                                            | 0                                                   | 1,800                                                                         | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                                   | 545                                                            | 0                                                              | 0                                                   | 0                                                                             | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                                     | 211                                                            | 0                                                              | 0                                                   | 0                                                                             | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                                        | 0                                                              | 0                                                              | 0                                                   | 912                                                                           | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND                               | 0                                                              | 0                                                              | 0                                                   | 184                                                                           | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                                          | 162                                                            | 0                                                              | 0                                                   | 0                                                                             | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY                               | 0                                                              | 0                                                              | 0                                                   | 999                                                                           | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT                              | 0                                                              | 0                                                              | 0                                                   | 750                                                                           | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                                           |                                                                |                                                                |                                                     |                                                                               |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                                       | 80,705                                                         | 0                                                              | 0                                                   | 0                                                                             | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT                              | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT                               | 0                                                              | 0                                                              | 0                                                   | 3,460                                                                         | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT                             | 1,219                                                          | 0                                                              | 0                                                   | 0                                                                             | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT                             | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 41.00  |
| 43.00                                  | 04300 | NURSERY                                                   | 14,697                                                         | 0                                                              | 0                                                   | 0                                                                             | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                                           |                                                                |                                                                |                                                     |                                                                               |        |
| 50.00                                  | 05000 | OPERATING ROOM                                            | 18,373                                                         | 0                                                              | 0                                                   | 10,965                                                                        | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                                             | 7,671                                                          | 0                                                              | 0                                                   | 0                                                                             | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM                                | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                                            | 1,451                                                          | 0                                                              | 0                                                   | 629                                                                           | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                                      | 0                                                              | 8,068                                                          | 2,763                                               | 0                                                                             | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                                     | 17,701                                                         | 0                                                              | 0                                                   | 0                                                                             | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                                              | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 56.00  |
| 60.00                                  | 06000 | LABORATORY                                                | 30,643                                                         | 8,446                                                          | 5,130                                               | 2,139                                                                         | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                                          | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY                       | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS                      | 0                                                              | 0                                                              | 535                                                 | 0                                                                             | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                                       | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                                       | 895                                                            | 0                                                              | 0                                                   | 0                                                                             | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                                          | 759                                                            | 0                                                              | 1,220                                               | 0                                                                             | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                                      | 0                                                              | 0                                                              | 3,005                                               | 0                                                                             | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                                          | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                                         | 1,246                                                          | 0                                                              | 0                                                   | 0                                                                             | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                                    | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS                      | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS                            | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS                                 | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                                            | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                                      | 766                                                            | 0                                                              | 0                                                   | 0                                                                             | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                                        | 0                                                              | 0                                                              | 1,031                                               | 0                                                                             | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                                           |                                                                |                                                                |                                                     |                                                                               |        |
| 90.00                                  | 09000 | CLINIC                                                    | 0                                                              | 38,217                                                         | 18,889                                              | 1,604                                                                         | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                                                 | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)                      | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)                          | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                                           |                                                                |                                                                |                                                     |                                                                               |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                                     | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS                           | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM                              | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                                           |                                                                |                                                                |                                                     |                                                                               |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                                        | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                                          | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                                      | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF                                  | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117)                    | 319,360                                                        | 77,948                                                         | 56,012                                              | 13,705                                                                        | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                                           |                                                                |                                                                |                                                     |                                                                               |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN                       | 1,983                                                          | 1,405                                                          | 2,089                                               | 0                                                                             | 190.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | CAPITAL RELATED COSTS                                     |                                                                |                                                                |                                                     |                                                                               |        |
|-------------------------|-------|--------------------------------------------------------|-----------------------------------------------------------|----------------------------------------------------------------|----------------------------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------------------------|--------|
|                         |       |                                                        | DEPRECIATION<br>ATRIUM PAV<br>(SQUARE FEET<br>ATRIUM PAV) | DEPRECIATION<br>PRO BLDG NORTH<br>(SQUARE FEET<br>PRO BLDG NO) | DEPRECIATION<br>PRO BLDG SOUTH<br>(SQUARE FEET<br>PRO BLDG SO) | DEPRECIATION<br>WOOD ST<br>(SQUARE FEET<br>WOOD ST) | DEPRECIATION<br>ACADEMIC<br>FACILITY<br>(SQUARE FEET<br>ACADEMIC<br>FACILITY) |        |
|                         |       |                                                        | 1.05                                                      | 1.06                                                           | 1.07                                                           | 1.08                                                | 1.09                                                                          |        |
| 190.01                  | 19001 | FUND RAISING                                           | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 190.01 |
| 190.02                  | 19002 | RUSH DAY SCHOOL                                        | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 190.02 |
| 191.00                  | 19100 | RESEARCH                                               | 0                                                         | 96                                                             | 1,625                                                          | 0                                                   | 5,723                                                                         | 191.00 |
| 191.01                  | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY                    | 0                                                         | 232                                                            | 2,485                                                          | 0                                                   | 928                                                                           | 191.01 |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 0                                                         | 140                                                            | 1,877                                                          | 0                                                   | 1,259                                                                         | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 2,676                                                     | 66,735                                                         | 22,885                                                         | 10,770                                              | 2,138                                                                         | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 17,017                                                                        | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                                                         | 4,812                                                          | 0                                                              | 0                                                   | 0                                                                             | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                                         | 17,937                                                         | 8,786                                                          | 0                                                   | 0                                                                             | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                                         | 0                                                              | 0                                                              | 0                                                   | 0                                                                             | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                           |                                                                |                                                                |                                                     |                                                                               | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                                           |                                                                |                                                                |                                                     |                                                                               | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 7,477,816                                                 | 1,335,586                                                      | 866,827                                                        | 346,213                                             | 804,422                                                                       | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 23.078326                                                 | 7.888639                                                       | 9.052173                                                       | 14.145577                                           | 2.892918                                                                      | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            |                                                           |                                                                |                                                                |                                                     |                                                                               | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                |                                                           |                                                                |                                                                |                                                     |                                                                               | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                                           |                                                                |                                                                |                                                     |                                                                               | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                                           |                                                                |                                                                |                                                     |                                                                               | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

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11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS                                         |                                             |                                             |                                                     |                                                             |       |
|------------------------------|-------|--------------------------------------|---------------------------------------------------------------|---------------------------------------------|---------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------|-------|
|                              |       |                                      | DEPRECIATION<br>PRO BLDG III<br>(SQUARE FEET<br>PRO BLDG III) | DEPRECIATION<br>JRB<br>(SQUARE FEET<br>JRB) | DEPRECIATION<br>TOB<br>(SQUARE FEET<br>TOB) | DEPRECIATION<br>EQUIPMENT<br>(SQUARE FEET<br>TOTAL) | DEPRECIATION<br>ORTHOPEDICS<br>(SQUARE FEET<br>ORTHOPEDICS) |       |
|                              |       |                                      | 1.10                                                          | 1.11                                        | 1.12                                        | 1.13                                                | 1.14                                                        |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                                               |                                             |                                             |                                                     |                                                             |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                                               |                                             |                                             |                                                     |                                                             | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                                               |                                             |                                             |                                                     |                                                             | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                                               |                                             |                                             |                                                     |                                                             | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                                               |                                             |                                             |                                                     |                                                             | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                                               |                                             |                                             |                                                     |                                                             | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                                               |                                             |                                             |                                                     |                                                             | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                                               |                                             |                                             |                                                     |                                                             | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                                               |                                             |                                             |                                                     |                                                             | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                                               |                                             |                                             |                                                     |                                                             | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                                               |                                             |                                             |                                                     |                                                             | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            | 193,982                                                       |                                             |                                             |                                                     |                                                             | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     | 0                                                             | 111,957                                     |                                             |                                                     |                                                             | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     | 0                                                             | 0                                           | 178,133                                     |                                                     |                                                             | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               | 0                                                             | 0                                           | 0                                           | 3,081,550                                           |                                                             | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             | 0                                                             | 0                                           | 0                                           | 0                                                   | 114,530                                                     | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                                               |                                             |                                             |                                                     |                                                             | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                                               |                                             |                                             |                                                     |                                                             | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                                                               |                                             |                                             |                                                     |                                                             | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                                                               |                                             |                                             |                                                     |                                                             | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                                                               |                                             |                                             |                                                     |                                                             | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                                                               |                                             |                                             |                                                     |                                                             | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                                                               |                                             |                                             |                                                     |                                                             | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                                                               |                                             |                                             |                                                     |                                                             | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                                                               |                                             |                                             |                                                     |                                                             | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                                                             | 0                                           | 2,149                                       | 18,330                                              | 0                                                           | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 0                                                             | 0                                           | 0                                           | 670                                                 | 0                                                           | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                                                             | 0                                           | 1,446                                       | 5,256                                               | 0                                                           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                                                             | 0                                           | 0                                           | 4,197                                               | 0                                                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                                                             | 0                                           | 0                                           | 4,415                                               | 0                                                           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                                                             | 0                                           | 812                                         | 15,984                                              | 0                                                           | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 1,642                                                         | 600                                         | 59,071                                      | 113,902                                             | 1,285                                                       | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                                                             | 0                                           | 0                                           | 4,782                                               | 0                                                           | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                                                             | 0                                           | 0                                           | 1,143                                               | 0                                                           | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                                                             | 0                                           | 8                                           | 9,672                                               | 0                                                           | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 6,941                                                         | 4,055                                       | 39,528                                      | 123,775                                             | 23,843                                                      | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 33,327                                                        | 10,328                                      | 18,026                                      | 526,605                                             | 11,101                                                      | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                                                             | 0                                           | 0                                           | 8,751                                               | 3,195                                                       | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 2,333                                                         | 1,992                                       | 540                                         | 52,490                                              | 24,093                                                      | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                                                             | 0                                           | 4,723                                       | 4,723                                               | 0                                                           | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                                                             | 262                                         | 0                                           | 25,703                                              | 0                                                           | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0                                                             | 0                                           | 1,743                                       | 37,680                                              | 0                                                           | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                                                             | 1,064                                       | 0                                           | 14,181                                              | 0                                                           | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                                                             | 708                                         | 0                                           | 34,406                                              | 0                                                           | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                                                             | 0                                           | 0                                           | 16,994                                              | 0                                                           | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                                                             | 0                                           | 0                                           | 12,248                                              | 10,335                                                      | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                                                             | 584                                         | 0                                           | 10,667                                              | 0                                                           | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                                                             | 0                                           | 0                                           | 378                                                 | 0                                                           | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                                                             | 0                                           | 0                                           | 6,209                                               | 0                                                           | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 444                                                           | 0                                           | 0                                           | 5,131                                               | 0                                                           | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                                                             | 0                                           | 0                                           | 4,762                                               | 0                                                           | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                                                             | 0                                           | 0                                           | 13,472                                              | 0                                                           | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                                                             | 0                                           | 0                                           | 501                                                 | 0                                                           | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                                                             | 0                                           | 0                                           | 1,044                                               | 0                                                           | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                                                             | 0                                           | 0                                           | 3,696                                               | 0                                                           | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                                                             | 0                                           | 6,033                                       | 104,089                                             | 0                                                           | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                                                             | 0                                           | 0                                           | 18,082                                              | 0                                                           | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                                             | 0                                           | 1,972                                       | 20,010                                              | 0                                                           | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 426                                                           | 0                                           | 0                                           | 19,363                                              | 82                                                          | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                                                             | 0                                           | 2,001                                       | 5,674                                               | 0                                                           | 23.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS                                         |                                             |                                             |                                                     |                                                             |        |
|----------------------------------------|-------|----------------------------------------|---------------------------------------------------------------|---------------------------------------------|---------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------|--------|
|                                        |       |                                        | DEPRECIATION<br>PRO BLDG III<br>(SQUARE FEET<br>PRO BLDG III) | DEPRECIATION<br>JRB<br>(SQUARE FEET<br>JRB) | DEPRECIATION<br>TOB<br>(SQUARE FEET<br>TOB) | DEPRECIATION<br>EQUIPMENT<br>(SQUARE FEET<br>TOTAL) | DEPRECIATION<br>ORTHOPEDICS<br>(SQUARE FEET<br>ORTHOPEDICS) |        |
|                                        |       |                                        | 1.10                                                          | 1.11                                        | 1.12                                        | 1.13                                                | 1.14                                                        |        |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 0                                                             | 0                                           | 0                                           | 296                                                 | 0                                                           | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                                                             | 0                                           | 0                                           | 976                                                 | 0                                                           | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                                                             | 0                                           | 0                                           | 3,998                                               | 1,424                                                       | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                                                             | 0                                           | 0                                           | 2,020                                               | 0                                                           | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                                                             | 0                                           | 0                                           | 545                                                 | 0                                                           | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                                                             | 0                                           | 0                                           | 2,612                                               | 0                                                           | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                                                             | 0                                           | 0                                           | 912                                                 | 0                                                           | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                                                             | 0                                           | 0                                           | 184                                                 | 0                                                           | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                                                             | 0                                           | 0                                           | 162                                                 | 0                                                           | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                                                             | 0                                           | 0                                           | 999                                                 | 0                                                           | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                                                             | 0                                           | 0                                           | 750                                                 | 0                                                           | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                               |                                             |                                             |                                                     |                                                             |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                                             | 0                                           | 0                                           | 247,639                                             | 0                                                           | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                                             | 0                                           | 0                                           | 43,024                                              | 0                                                           | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                                                             | 0                                           | 0                                           | 45,608                                              | 0                                                           | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                                             | 0                                           | 0                                           | 12,947                                              | 0                                                           | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                                             | 0                                           | 0                                           | 36,810                                              | 0                                                           | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                                             | 7,820                                       | 0                                           | 26,388                                              | 0                                                           | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                                             | 24,341                                      | 0                                           | 24,341                                              | 0                                                           | 41.00  |
| 43.00                                  | 04300 | NURSEY                                 | 0                                                             | 0                                           | 0                                           | 14,697                                              | 0                                                           | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                               |                                             |                                             |                                                     |                                                             |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 836                                                           | 0                                           | 0                                           | 118,362                                             | 0                                                           | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                                             | 0                                           | 0                                           | 30,362                                              | 0                                                           | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                                             | 0                                           | 0                                           | 21,348                                              | 0                                                           | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 1,007                                                         | 0                                           | 0                                           | 16,133                                              | 0                                                           | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 11,593                                                        | 0                                           | 0                                           | 83,177                                              | 0                                                           | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                                             | 0                                           | 0                                           | 23,037                                              | 0                                                           | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                                             | 0                                           | 0                                           | 6,012                                               | 0                                                           | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 1,328                                                         | 0                                           | 812                                         | 98,406                                              | 442                                                         | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                                             | 0                                           | 0                                           | 1,441                                               | 0                                                           | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                                             | 0                                           | 0                                           | 5,021                                               | 0                                                           | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                                             | 0                                           | 0                                           | 6,708                                               | 0                                                           | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                                             | 6,034                                       | 0                                           | 12,487                                              | 0                                                           | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                                             | 5,216                                       | 0                                           | 11,219                                              | 0                                                           | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                                             | 463                                         | 0                                           | 7,533                                               | 7,026                                                       | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                                             | 0                                           | 0                                           | 14,872                                              | 0                                                           | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                                             | 0                                           | 0                                           | 2,455                                               | 0                                                           | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                                             | 0                                           | 0                                           | 2,080                                               | 0                                                           | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                                             | 3,895                                       | 127                                         | 14,424                                              | 0                                                           | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                               |                                             |                                             |                                                     |                                                             |        |
| 90.00                                  | 09000 | CLINIC                                 | 53,419                                                        | 4,619                                       | 0                                           | 132,704                                             | 12,321                                                      | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                                             | 0                                           | 0                                           | 50,832                                              | 0                                                           | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                               |                                             |                                             |                                                     |                                                             |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                               |                                             |                                             |                                                     |                                                             |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 1,358                                                         | 0                                           | 0                                           | 1,639                                               | 0                                                           | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 422                                                           | 0                                           | 0                                           | 506                                                 | 0                                                           | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 4                                                             | 0                                           | 0                                           | 4                                                   | 0                                                           | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 115,080                                                       | 71,981                                      | 138,991                                     | 2,374,655                                           | 95,147                                                      | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                               |                                             |                                             |                                                     |                                                             |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                                             | 28,621                                      | 875                                         | 47,116                                              | 0                                                           | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                                             | 0                                           | 0                                           | 6,539                                               | 0                                                           | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 70                                                            | 272                                         | 11,826                                      | 164,822                                             | 41                                                          | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 1,544                                                         | 495                                         | 1,528                                       | 14,476                                              | 39                                                          | 191.01 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | CAPITAL RELATED COSTS                                         |                                             |                                             |                                                     |                                                             |        |
|-------------------------|-------|--------------------------------------------------------|---------------------------------------------------------------|---------------------------------------------|---------------------------------------------|-----------------------------------------------------|-------------------------------------------------------------|--------|
|                         |       |                                                        | DEPRECIATION<br>PRO BLDG III<br>(SQUARE FEET<br>PRO BLDG III) | DEPRECIATION<br>JRB<br>(SQUARE FEET<br>JRB) | DEPRECIATION<br>TOB<br>(SQUARE FEET<br>TOB) | DEPRECIATION<br>EQUIPMENT<br>(SQUARE FEET<br>TOTAL) | DEPRECIATION<br>ORTHOPEDICS<br>(SQUARE FEET<br>ORTHOPEDICS) |        |
|                         |       |                                                        | 1.10                                                          | 1.11                                        | 1.12                                        | 1.13                                                | 1.14                                                        |        |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 148                                                           | 2,129                                       | 1,060                                       | 26,791                                              | 821                                                         | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 75,636                                                        | 7,007                                       | 23,679                                      | 388,065                                             | 18,482                                                      | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                                                             | 1,452                                       | 174                                         | 24,845                                              | 0                                                           | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 1,504                                                         | 0                                           | 0                                           | 7,518                                               | 0                                                           | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                                             | 0                                           | 0                                           | 26,723                                              | 0                                                           | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                                             | 0                                           | 0                                           | 0                                                   | 0                                                           | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                               |                                             |                                             |                                                     |                                                             | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                                               |                                             |                                             |                                                     |                                                             | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 1,606,287                                                     | 718,836                                     | 0                                           | 49,982,252                                          | 551,534                                                     | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 8.280598                                                      | 6.420644                                    | 0.000000                                    | 16.219841                                           | 4.815629                                                    | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            |                                                               |                                             |                                             |                                                     |                                                             | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                |                                                               |                                             |                                             |                                                     |                                                             | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                                               |                                             |                                             |                                                     |                                                             | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                                               |                                             |                                             |                                                     |                                                             | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                              |                                      | CAPITAL RELATED COSTS                               |                                               |                                                 |                               |                                                             |       |
|-------------------------|------------------------------|--------------------------------------|-----------------------------------------------------|-----------------------------------------------|-------------------------------------------------|-------------------------------|-------------------------------------------------------------|-------|
|                         |                              |                                      | DEPRECIATION<br>KIDSTON<br>(SQUARE FEET<br>KIDSTON) | DEPRECIATION<br>COHN<br>(SQUARE FEET<br>COHN) | DEPRECIATION<br>TOWER<br>(SQUARE FEET<br>TOWER) | MVBLE EQUIP<br>(DOLLAR VALUE) | INTEREST<br>GENERAL<br>(SQUARE FEET<br>INTEREST<br>GENERAL) |       |
|                         |                              |                                      | 1.15                                                | 1.16                                          | 1.17                                            | 2.00                          | 2.01                                                        |       |
|                         | GENERAL SERVICE COST CENTERS |                                      |                                                     |                                               |                                                 |                               |                                                             |       |
| 1.00                    | 00100                        | CAP REL COSTS-BLDG & FIXT            |                                                     |                                               |                                                 |                               |                                                             | 1.00  |
| 1.01                    | 00101                        | DEPRECIATION OLD HOSPITAL            |                                                     |                                               |                                                 |                               |                                                             | 1.01  |
| 1.02                    | 00102                        | DEPRECIATION DIRECT BLDG             |                                                     |                                               |                                                 |                               |                                                             | 1.02  |
| 1.03                    | 00103                        | DEPRECIATION KELLOGG PAV             |                                                     |                                               |                                                 |                               |                                                             | 1.03  |
| 1.04                    | 00104                        | DEPRECIATION JELKE SOUTH             |                                                     |                                               |                                                 |                               |                                                             | 1.04  |
| 1.05                    | 00105                        | DEPRECIATION ATRIUM PAV              |                                                     |                                               |                                                 |                               |                                                             | 1.05  |
| 1.06                    | 00106                        | DEPRECIATION PRO BLDG NORTH          |                                                     |                                               |                                                 |                               |                                                             | 1.06  |
| 1.07                    | 00107                        | DEPRECIATION PRO BLDG SOUTH          |                                                     |                                               |                                                 |                               |                                                             | 1.07  |
| 1.08                    | 00108                        | DEPRECIATION WOOD ST                 |                                                     |                                               |                                                 |                               |                                                             | 1.08  |
| 1.09                    | 00109                        | DEPRECIATION ACADEMIC FACILITY       |                                                     |                                               |                                                 |                               |                                                             | 1.09  |
| 1.10                    | 00110                        | DEPRECIATION PRO BLDG III            |                                                     |                                               |                                                 |                               |                                                             | 1.10  |
| 1.11                    | 00111                        | DEPRECIATION JRB                     |                                                     |                                               |                                                 |                               |                                                             | 1.11  |
| 1.12                    | 00112                        | DEPRECIATION TOB                     |                                                     |                                               |                                                 |                               |                                                             | 1.12  |
| 1.13                    | 00113                        | DEPRECIATION EQUIPMENT               |                                                     |                                               |                                                 |                               |                                                             | 1.13  |
| 1.14                    | 00114                        | DEPRECIATION ORTHOPEDICS             |                                                     |                                               |                                                 |                               |                                                             | 1.14  |
| 1.15                    | 00115                        | DEPRECIATION KIDSTON                 | 39,349                                              |                                               |                                                 |                               |                                                             | 1.15  |
| 1.16                    | 00116                        | DEPRECIATION COHN                    | 0                                                   | 104,450                                       |                                                 |                               |                                                             | 1.16  |
| 1.17                    | 00117                        | DEPRECIATION TOWER                   | 0                                                   | 0                                             | 712,778                                         |                               |                                                             | 1.17  |
| 2.00                    | 00200                        | CAP REL COSTS-MVBLE EQUIP            |                                                     |                                               |                                                 | 0                             |                                                             | 2.00  |
| 2.01                    | 00201                        | INTEREST GENERAL                     |                                                     |                                               |                                                 | 0                             | 1,082,718                                                   | 2.01  |
| 2.02                    | 00202                        | INTEREST DIRECT BLDG                 |                                                     |                                               |                                                 | 0                             | 0                                                           | 2.02  |
| 2.03                    | 00203                        | INTEREST ATRUM PAV                   |                                                     |                                               |                                                 | 0                             | 0                                                           | 2.03  |
| 2.04                    | 00204                        | INTEREST PRO BLDG SOUTH              |                                                     |                                               |                                                 | 0                             | 0                                                           | 2.04  |
| 2.05                    | 00205                        | INTEREST TOB                         |                                                     |                                               |                                                 | 0                             | 0                                                           | 2.05  |
| 2.06                    | 00206                        | INTEREST PRO BLDG III                |                                                     |                                               |                                                 | 0                             | 0                                                           | 2.06  |
| 2.07                    | 00207                        | INTEREST TOWER                       |                                                     |                                               |                                                 | 0                             | 0                                                           | 2.07  |
| 2.08                    | 00208                        | INTEREST PRO BLDG NORTH              |                                                     |                                               |                                                 | 0                             | 0                                                           | 2.08  |
| 4.00                    | 00400                        | EMPLOYEE BENEFITS DEPARTMENT         | 0                                                   | 0                                             | 0                                               | 0                             | 128                                                         | 4.00  |
| 5.01                    | 00590                        | TRANSITION RECRUITMENT               | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 5.01  |
| 5.02                    | 00540                        | PARKING GARAGE                       | 0                                                   | 0                                             | 268                                             | 0                             | 0                                                           | 5.02  |
| 5.03                    | 00591                        | RESEARCH ADMINISTRATION              | 0                                                   | 2,235                                         | 0                                               | 0                             | 3,250                                                       | 5.03  |
| 5.04                    | 00592                        | ADMIN & GEN INPT SERVICE             | 3,346                                               | 0                                             | 0                                               | 0                             | 3,346                                                       | 5.04  |
| 5.05                    | 00593                        | ADMIN & GEN OUTPT SERVICE            | 0                                                   | 0                                             | 1,649                                           | 0                             | 0                                                           | 5.05  |
| 5.06                    | 00594                        | ADMIN & GEN ANIMAL LAB               | 0                                                   | 10,288                                        | 0                                               | 0                             | 15,172                                                      | 5.06  |
| 5.07                    | 00595                        | ADMIN & GEN PT SERVICE               | 3,281                                               | 0                                             | 25,867                                          | 0                             | 19,202                                                      | 5.07  |
| 5.08                    | 00596                        | PERSONNEL DEPARTMENT                 | 0                                                   | 0                                             | 0                                               | 0                             | 4,782                                                       | 5.08  |
| 5.09                    | 00597                        | RESEARCH FACULTY                     | 0                                                   | 0                                             | 0                                               | 0                             | 419                                                         | 5.09  |
| 5.10                    | 00598                        | RESEARCH SPA                         | 0                                                   | 1,623                                         | 0                                               | 0                             | 9,664                                                       | 5.10  |
| 5.11                    | 00560                        | CORPORATE ADMINISTRATION             | 6,029                                               | 4,468                                         | 1,010                                           | 0                             | 69,015                                                      | 5.11  |
| 6.00                    | 00600                        | MAINTENANCE & REPAIRS                | 8,274                                               | 5,704                                         | 107,226                                         | 0                             | 243,719                                                     | 6.00  |
| 6.01                    | 00601                        | RENTED SPACE COSTS                   | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 6.01  |
| 8.00                    | 00800                        | LAUNDRY & LINEN SERVICE              | 0                                                   | 0                                             | 3,553                                           | 0                             | 4,367                                                       | 8.00  |
| 9.00                    | 00900                        | HOUSEKEEPING                         | 136                                                 | 681                                           | 8,077                                           | 0                             | 35,931                                                      | 9.00  |
| 10.00                   | 01000                        | DIETARY                              | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 10.00 |
| 10.01                   | 01001                        | PATIENT FOOD SERVICE                 | 0                                                   | 0                                             | 3,376                                           | 0                             | 482                                                         | 10.01 |
| 11.00                   | 01100                        | CAFETERIA                            | 0                                                   | 38                                            | 5,093                                           | 0                             | 1,791                                                       | 11.00 |
| 13.00                   | 01300                        | NURSING ADMINISTRATION               | 0                                                   | 0                                             | 1,552                                           | 0                             | 11,566                                                      | 13.00 |
| 14.00                   | 01400                        | CENTRAL SERVICES & SUPPLY            | 0                                                   | 0                                             | 28,965                                          | 0                             | 0                                                           | 14.00 |
| 15.00                   | 01500                        | PHARMACY                             | 0                                                   | 0                                             | 2,408                                           | 0                             | 3,481                                                       | 15.00 |
| 16.00                   | 01600                        | MEDICAL RECORDS & LIBRARY            | 0                                                   | 0                                             | 0                                               | 0                             | 12,248                                                      | 16.00 |
| 16.01                   | 01601                        | MEDICAL RECORDS & LIBRARY            | 6,855                                               | 0                                             | 0                                               | 0                             | 8,551                                                       | 16.01 |
| 18.00                   | 01850                        | CLINICAL LAB ADMIN MED               | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 18.00 |
| 18.01                   | 01800                        | CLINICAL LAB ADMIN PED               | 0                                                   | 0                                             | 0                                               | 0                             | 378                                                         | 18.01 |
| 18.02                   | 01851                        | CLINICAL LAB ADMIN OB                | 0                                                   | 0                                             | 0                                               | 0                             | 5,313                                                       | 18.02 |
| 18.03                   | 01852                        | CLINICAL LAB ADMIN SURG              | 25                                                  | 0                                             | 0                                               | 0                             | 2,392                                                       | 18.03 |
| 18.04                   | 01853                        | CLINICAL LAB ADMIN PSYCH             | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 18.04 |
| 18.05                   | 01854                        | CLINICAL LAB ADMIN PATH              | 0                                                   | 0                                             | 0                                               | 0                             | 13,472                                                      | 18.05 |
| 18.06                   | 01855                        | CLINICAL LAB ADMIN CARD              | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 18.06 |
| 18.07                   | 01856                        | CLINICAL LAB ADMIN HEMAT             | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 18.07 |
| 18.08                   | 01857                        | CLINICAL LAB ADMIN NEUR              | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 18.08 |
| 18.09                   | 01858                        | CLINICAL LAB ADMIN OCLS              | 0                                                   | 0                                             | 0                                               | 0                             | 1,044                                                       | 18.09 |
| 18.12                   | 01859                        | DISCRETIONARY OPERATIONS             | 0                                                   | 0                                             | 0                                               | 0                             | 3,696                                                       | 18.12 |
| 18.14                   | 01860                        | RUSH UNIVERSITY ADMIN SPLIT          | 1,924                                               | 0                                             | 0                                               | 0                             | 96,952                                                      | 18.14 |
| 18.16                   | 01861                        | NURSING SCHOOL SPLIT                 | 0                                                   | 0                                             | 0                                               | 0                             | 17,602                                                      | 18.16 |
| 19.00                   | 01900                        | NONPHYSICIAN ANESTHETISTS            | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 19.00 |
| 20.00                   | 02000                        | NURSING SCHOOL                       | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 20.00 |
| 21.00                   | 02100                        | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                                   | 0                                             | 4,501                                           | 0                             | 12,040                                                      | 21.00 |
| 22.00                   | 02200                        | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                                   | 0                                             | 0                                               | 0                             | 10,627                                                      | 22.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS                               |                                               |                                                 |                               |                                                             |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------------------------------|-----------------------------------------------|-------------------------------------------------|-------------------------------|-------------------------------------------------------------|--------|
|                                        |       |                                        | DEPRECIATION<br>KIDSTON<br>(SQUARE FEET<br>KIDSTON) | DEPRECIATION<br>COHN<br>(SQUARE FEET<br>COHN) | DEPRECIATION<br>TOWER<br>(SQUARE FEET<br>TOWER) | MVBLE EQUIP<br>(DOLLAR VALUE) | INTEREST<br>GENERAL<br>(SQUARE FEET<br>INTEREST<br>GENERAL) |        |
|                                        |       |                                        | 1.15                                                | 1.16                                          | 1.17                                            | 2.00                          | 2.01                                                        |        |
| 23.00                                  | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT       | 0                                                   | 0                                             | 0                                               | 0                             | 3,449                                                       | 23.00  |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 0                                                   | 0                                             | 0                                               | 0                             | 296                                                         | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                                                   | 0                                             | 0                                               | 0                             | 976                                                         | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                                                   | 0                                             | 0                                               | 0                             | 3,370                                                       | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                                                   | 0                                             | 0                                               | 0                             | 1,800                                                       | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 1,428                                               | 0                                             | 0                                               | 0                             | 2,401                                                       | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                                                   | 0                                             | 0                                               | 0                             | 912                                                         | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                                                   | 0                                             | 0                                               | 0                             | 184                                                         | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                                                   | 0                                             | 0                                               | 0                             | 999                                                         | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                                                   | 0                                             | 0                                               | 0                             | 750                                                         | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                     |                                               |                                                 |                               |                                                             |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 631                                                 | 0                                             | 134,362                                         | 0                             | 29,776                                                      | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                                   | 0                                             | 43,024                                          | 0                             | 0                                                           | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                                                   | 0                                             | 42,148                                          | 0                             | 3,460                                                       | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                                   | 0                                             | 0                                               | 0                             | 11,728                                                      | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                                   | 0                                             | 36,810                                          | 0                             | 0                                                           | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                                   | 0                                             | 0                                               | 0                             | 18,568                                                      | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                     |                                               |                                                 |                               |                                                             |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                                                   | 0                                             | 84,363                                          | 0                             | 14,790                                                      | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                                   | 0                                             | 22,692                                          | 0                             | 0                                                           | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                                   | 0                                             | 21,348                                          | 0                             | 0                                                           | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                                                   | 0                                             | 6,013                                           | 0                             | 7,662                                                       | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                                   | 0                                             | 46,125                                          | 0                             | 12,537                                                      | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                                   | 195                                           | 922                                             | 0                             | 4,414                                                       | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                                   | 0                                             | 6,012                                           | 0                             | 0                                                           | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 1,329                                               | 91                                            | 10,673                                          | 0                             | 37,046                                                      | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                                   | 0                                             | 0                                               | 0                             | 1,441                                                       | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                                   | 0                                             | 2,913                                           | 0                             | 1,573                                                       | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                                   | 0                                             | 4,765                                           | 0                             | 1,048                                                       | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                                   | 0                                             | 2,438                                           | 0                             | 2,036                                                       | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                                   | 0                                             | 139                                             | 0                             | 2,859                                                       | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                                   | 0                                             | 44                                              | 0                             | 7,026                                                       | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                                   | 0                                             | 10,532                                          | 0                             | 3,094                                                       | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                                   | 0                                             | 2,455                                           | 0                             | 0                                                           | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                                   | 0                                             | 0                                               | 0                             | 1,314                                                       | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                                   | 0                                             | 1,382                                           | 0                             | 0                                                           | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                     |                                               |                                                 |                               |                                                             |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                                                   | 0                                             | 69                                              | 0                             | 17,491                                                      | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                                   | 0                                             | 38,490                                          | 0                             | 12,342                                                      | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                     |                                               |                                                 |                               |                                                             |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                     |                                               |                                                 |                               |                                                             |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 282                                                 | 0                                             | 0                                               | 0                             | 282                                                         | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 84                                                  | 0                                             | 0                                               | 0                             | 84                                                          | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 33,624                                              | 25,323                                        | 711,264                                         | 0                             | 816,338                                                     | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                     |                                               |                                                 |                               |                                                             |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                                   | 0                                             | 1,278                                           | 0                             | 1,206                                                       | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 190.02 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | CAPITAL RELATED COSTS                               |                                               |                                                 |                               |                                                             |        |
|-------------------------|-------|--------------------------------------------------------|-----------------------------------------------------|-----------------------------------------------|-------------------------------------------------|-------------------------------|-------------------------------------------------------------|--------|
|                         |       |                                                        | DEPRECIATION<br>KIDSTON<br>(SQUARE FEET<br>KIDSTON) | DEPRECIATION<br>COHN<br>(SQUARE FEET<br>COHN) | DEPRECIATION<br>TOWER<br>(SQUARE FEET<br>TOWER) | MVBLE EQUIP<br>(DOLLAR VALUE) | INTEREST<br>GENERAL<br>(SQUARE FEET<br>INTEREST<br>GENERAL) |        |
|                         |       |                                                        | 1.15                                                | 1.16                                          | 1.17                                            | 2.00                          | 2.01                                                        |        |
| 191.00                  | 19100 | RESEARCH                                               | 88                                                  | 69,309                                        | 0                                               | 0                             | 137,221                                                     | 191.00 |
| 191.01                  | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY                    | 2,088                                               | 54                                            | 0                                               | 0                             | 3,916                                                       | 191.01 |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 88                                                  | 7,831                                         | 0                                               | 0                             | 18,916                                                      | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 2,546                                               | 867                                           | 236                                             | 0                             | 80,771                                                      | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 915                                                 | 1,066                                         | 0                                               | 0                             | 23,148                                                      | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                                                   | 0                                             | 0                                               | 0                             | 1,202                                                       | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                                   | 0                                             | 0                                               | 0                             | 0                                                           | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                     |                                               |                                                 |                               |                                                             | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                                     |                                               |                                                 |                               |                                                             | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 31,147                                              | 1,410,661                                     | 17,971,484                                      | 0                             | 0                                                           | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 0.791558                                            | 13.505610                                     | 25.213298                                       | 0.000000                      | 0.000000                                                    | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            |                                                     |                                               |                                                 |                               |                                                             | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                |                                                     |                                               |                                                 |                               |                                                             | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                                     |                                               |                                                 |                               |                                                             | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                                     |                                               |                                                 |                               |                                                             | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

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To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS                                   |                                                      |                                                            |                                      |                                                           |       |
|------------------------------|-------|--------------------------------------|---------------------------------------------------------|------------------------------------------------------|------------------------------------------------------------|--------------------------------------|-----------------------------------------------------------|-------|
|                              |       |                                      | INTEREST<br>DIRECT BLDG<br>(PERCENT INT<br>DIRECT BLDG) | INTEREST ATRUM<br>PAV<br>(SQUARE FEET<br>ATRIUM PAV) | INTEREST PRO<br>BLDG SOUTH<br>(SQUARE FEET<br>PRO BLDG SO) | INTEREST TOB<br>(SQUARE FEET<br>TOB) | INTEREST PRO<br>BLDG III<br>(SQUARE FEET<br>PRO BLDG III) |       |
|                              |       |                                      | 2.02                                                    | 2.03                                                 | 2.04                                                       | 2.05                                 | 2.06                                                      |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                                         |                                                      |                                                            |                                      |                                                           |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                                         |                                                      |                                                            |                                      |                                                           | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                                         |                                                      |                                                            |                                      |                                                           | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                                         |                                                      |                                                            |                                      |                                                           | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                                         |                                                      |                                                            |                                      |                                                           | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                                         |                                                      |                                                            |                                      |                                                           | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                                         |                                                      |                                                            |                                      |                                                           | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                                         |                                                      |                                                            |                                      |                                                           | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                                         |                                                      |                                                            |                                      |                                                           | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                                         |                                                      |                                                            |                                      |                                                           | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                                         |                                                      |                                                            |                                      |                                                           | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                                                         |                                                      |                                                            |                                      |                                                           | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                                                         |                                                      |                                                            |                                      |                                                           | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                                                         |                                                      |                                                            |                                      |                                                           | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                                                         |                                                      |                                                            |                                      |                                                           | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                                                         |                                                      |                                                            |                                      |                                                           | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                                                         |                                                      |                                                            |                                      |                                                           | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                                                         |                                                      |                                                            |                                      |                                                           | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                                                         |                                                      |                                                            |                                      |                                                           | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                                         |                                                      |                                                            |                                      |                                                           | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                                         |                                                      |                                                            |                                      |                                                           | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 | 3                                                       |                                                      |                                                            |                                      |                                                           | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   | 0                                                       | 324,019                                              |                                                            |                                      |                                                           | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              | 0                                                       | 0                                                    | 95,759                                                     |                                      |                                                           | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         | 0                                                       | 0                                                    | 0                                                          | 178,133                              |                                                           | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                | 0                                                       | 0                                                    | 0                                                          | 0                                    | 193,982                                                   | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                                                       | 2,592                                                | 0                                                          | 2,149                                | 0                                                         | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 1                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                                                       | 0                                                    | 0                                                          | 1,446                                | 0                                                         | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                                                       | 852                                                  | 0                                                          | 0                                    | 0                                                         | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                                                       | 2,754                                                | 0                                                          | 0                                    | 0                                                         | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                                                       | 0                                                    | 0                                                          | 812                                  | 0                                                         | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 0                                                       | 6,084                                                | 964                                                        | 59,071                               | 1,642                                                     | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                                                       | 0                                                    | 217                                                        | 0                                    | 0                                                         | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                                                       | 0                                                    | 0                                                          | 8                                    | 0                                                         | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 1                                                       | 3,221                                                | 0                                                          | 39,528                               | 6,941                                                     | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0                                                       | 75,831                                               | 20,610                                                     | 18,026                               | 33,327                                                    | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                                                       | 831                                                  | 0                                                          | 0                                    | 0                                                         | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0                                                       | 3,131                                                | 281                                                        | 540                                  | 2,333                                                     | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                                                       | 0                                                    | 0                                                          | 4,723                                | 0                                                         | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                                                       | 21,583                                               | 0                                                          | 0                                    | 0                                                         | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 1                                                       | 5,113                                                | 0                                                          | 1,743                                | 0                                                         | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                                                       | 4,734                                                | 0                                                          | 0                                    | 0                                                         | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                                                       | 11,049                                               | 0                                                          | 0                                    | 0                                                         | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                                                       | 1,476                                                | 0                                                          | 0                                    | 0                                                         | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                                                       | 1,088                                                | 0                                                          | 0                                    | 444                                                       | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                                                       | 0                                                    | 208                                                        | 0                                    | 0                                                         | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                                                       | 0                                                    | 78                                                         | 6,033                                | 0                                                         | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                                                       | 480                                                  | 0                                                          | 0                                    | 0                                                         | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                                                       | 0                                                    | 0                                                          | 0                                    | 0                                                         | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                                       | 1,497                                                | 0                                                          | 1,972                                | 0                                                         | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                                       | 0                                                    | 1,081                                                      | 0                                    | 426                                                       | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                                                       | 0                                                    | 0                                                          | 2,001                                | 0                                                         | 23.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS |                |              |              |               |        |
|----------------------------------------|-------|----------------------------------------|-----------------------|----------------|--------------|--------------|---------------|--------|
|                                        |       |                                        | INTEREST              | INTEREST ATRUM | INTEREST PRO | INTEREST TOB | INTEREST PRO  |        |
|                                        |       |                                        | DIRECT BLDG           | PAV            | BLDG SOUTH   | (SQUARE FEET | BLDG III      |        |
|                                        |       |                                        | (PERCENT INT          | (SQUARE FEET   | (SQUARE FEET | TOB)         | (SQUARE FEET  |        |
|                                        |       |                                        | DIRECT BLDG)          | ATRIUM PAV)    | PRO BLDG SO) |              | PRO BLDG III) |        |
|                                        |       |                                        | 2.02                  | 2.03           | 2.04         | 2.05         | 2.06          |        |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 0                     | 0              | 0            | 0            | 0             | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                     | 0              | 0            | 0            | 0             | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                     | 0              | 0            | 0            | 0             | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                     | 0              | 0            | 0            | 0             | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                     | 545            | 0            | 0            | 0             | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                     | 211            | 0            | 0            | 0             | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                     | 0              | 0            | 0            | 0             | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                     | 0              | 0            | 0            | 0             | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                     | 162            | 0            | 0            | 0             | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                     | 0              | 0            | 0            | 0             | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                     | 0              | 0            | 0            | 0             | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                       |                |              |              |               |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                     | 80,705         | 0            | 0            | 0             | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                     | 0              | 0            | 0            | 0             | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                     | 0              | 0            | 0            | 0             | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                     | 1,219          | 0            | 0            | 0             | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                     | 0              | 0            | 0            | 0             | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                     | 0              | 0            | 0            | 0             | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                     | 0              | 0            | 0            | 0             | 41.00  |
| 43.00                                  | 04300 | NURSEY                                 | 0                     | 14,697         | 0            | 0            | 0             | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                       |                |              |              |               |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                     | 18,373         | 0            | 0            | 836           | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                     | 7,671          | 0            | 0            | 0             | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                     | 0              | 0            | 0            | 0             | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                     | 1,451          | 0            | 0            | 1,007         | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                     | 0              | 2,763        | 0            | 11,593        | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                     | 17,701         | 0            | 0            | 0             | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                     | 0              | 0            | 0            | 0             | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                     | 30,643         | 5,130        | 812          | 1,328         | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                     | 0              | 0            | 0            | 0             | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                     | 0              | 535          | 0            | 0             | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                     | 0              | 0            | 0            | 0             | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                     | 0              | 0            | 0            | 0             | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                     | 895            | 0            | 0            | 0             | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                     | 759            | 1,220        | 0            | 0             | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                     | 0              | 3,005        | 0            | 0             | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                     | 0              | 0            | 0            | 0             | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                     | 1,246          | 0            | 0            | 0             | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                     | 0              | 0            | 0            | 0             | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                     | 0              | 0            | 0            | 0             | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                     | 0              | 0            | 0            | 0             | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                     | 0              | 0            | 0            | 0             | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                     | 0              | 0            | 0            | 0             | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                     | 766            | 0            | 0            | 0             | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                     | 0              | 1,031        | 127          | 0             | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                       |                |              |              |               |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                     | 0              | 18,889       | 0            | 53,419        | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                     | 0              | 0            | 0            | 0             | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                     | 0              | 0            | 0            | 0             | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                     | 0              | 0            | 0            | 0             | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                     | 0              | 0            | 0            | 0             | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                       |                |              |              |               |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                     | 0              | 0            | 0            | 0             | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                     | 0              | 0            | 0            | 0             | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                     | 0              | 0            | 0            | 0             | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                       |                |              |              |               |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                     | 0              | 0            | 0            | 1,358         | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                     | 0              | 0            | 0            | 0             | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                     | 0              | 0            | 0            | 422           | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                     | 0              | 0            | 0            | 0             | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                     | 0              | 0            | 0            | 4             | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                     | 0              | 0            | 0            | 0             | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                     | 0              | 0            | 0            | 0             | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 3                     | 319,360        | 56,012       | 138,991      | 115,080       | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                       |                |              |              |               |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                     | 1,983          | 2,089        | 875          | 0             | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                     | 0              | 0            | 0            | 0             | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                     | 0              | 0            | 0            | 0             | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                     | 0              | 1,625        | 11,826       | 70            | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                     | 0              | 2,485        | 1,528        | 1,544         | 191.01 |

## COST ALLOCATION - STATISTICAL BASIS

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11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | CAPITAL RELATED COSTS |                |              |              |               |        |
|-------------------------|-------|--------------------------------------------------------|-----------------------|----------------|--------------|--------------|---------------|--------|
|                         |       |                                                        | INTEREST              | INTEREST ATRUM | INTEREST PRO | INTEREST TOB | INTEREST PRO  |        |
|                         |       |                                                        | DIRECT BLDG           | PAV            | BLDG SOUTH   | (SQUARE FEET | BLDG III      |        |
|                         |       |                                                        | (PERCENT INT          | (SQUARE FEET   | (SQUARE FEET | TOB)         | (SQUARE FEET  |        |
|                         |       |                                                        | DIRECT BLDG)          | ATRIUM PAV)    | PRO BLDG SO) |              | PRO BLDG III) |        |
|                         |       |                                                        | 2.02                  | 2.03           | 2.04         | 2.05         | 2.06          |        |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 0                     | 0              | 1,877        | 1,060        | 148           | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 0                     | 2,676          | 22,885       | 23,679       | 75,636        | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                     | 0              | 0            | 174          | 0             | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                     | 0              | 0            | 0            | 1,504         | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                     | 0              | 8,786        | 0            | 0             | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                     | 0              | 0            | 0            | 0             | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                     | 0              | 0            | 0            | 0             | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                       |                |              |              |               | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                       |                |              |              |               | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 0                     | 0              | 0            | 0            | 0             | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 0.000000              | 0.000000       | 0.000000     | 0.000000     | 0.000000      | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            |                       |                |              |              |               | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                |                       |                |              |              |               | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                       |                |              |              |               | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                       |                |              |              |               | 207.00 |

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Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | CAPITAL RELATED COSTS  |                              | EMPLOYEE<br>BENEFITS<br>DEPARTMENT<br>(GROSS<br>SALARIES) | TRANSITION<br>RECRUITMENT<br>(TRANS/REC) | PARKING GARAGE<br>(DIRECT COST<br>RPSL/JRB) |       |
|------------------------------|-------|--------------------------------------|------------------------|------------------------------|-----------------------------------------------------------|------------------------------------------|---------------------------------------------|-------|
|                              |       |                                      | INTEREST TOWER         | INTEREST PRO<br>BLDG NORTH   |                                                           |                                          |                                             |       |
|                              |       |                                      | (SQUARE FEET<br>TOWER) | (SQUARE FEET<br>PRO BLDG NO) |                                                           |                                          |                                             |       |
|                              |       |                                      | 2.07                   | 2.08                         | 4.00                                                      | 5.01                                     | 5.02                                        |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                        |                              |                                                           |                                          |                                             |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                        |                              |                                                           |                                          |                                             | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                        |                              |                                                           |                                          |                                             | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                        |                              |                                                           |                                          |                                             | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                        |                              |                                                           |                                          |                                             | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                        |                              |                                                           |                                          |                                             | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                        |                              |                                                           |                                          |                                             | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                        |                              |                                                           |                                          |                                             | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                        |                              |                                                           |                                          |                                             | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                        |                              |                                                           |                                          |                                             | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                        |                              |                                                           |                                          |                                             | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                        |                              |                                                           |                                          |                                             | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                        |                              |                                                           |                                          |                                             | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                        |                              |                                                           |                                          |                                             | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                        |                              |                                                           |                                          |                                             | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                        |                              |                                                           |                                          |                                             | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                        |                              |                                                           |                                          |                                             | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                        |                              |                                                           |                                          |                                             | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                        |                              |                                                           |                                          |                                             | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                        |                              |                                                           |                                          |                                             | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                        |                              |                                                           |                                          |                                             | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                        |                              |                                                           |                                          |                                             | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                        |                              |                                                           |                                          |                                             | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                        |                              |                                                           |                                          |                                             | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                        |                              |                                                           |                                          |                                             | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                        |                              |                                                           |                                          |                                             | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       | 712,778                |                              |                                                           |                                          |                                             | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              | 0                      | 169,305                      |                                                           |                                          |                                             | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         | 0                      | 0                            | 866,810,777                                               |                                          |                                             | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               | 0                      | 0                            | 0                                                         | 10,000                                   |                                             | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       | 268                    | 401                          | 0                                                         | 0                                        | 1,744,189,906                               | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 0                      | 15                           | 5,313,921                                                 | 0                                        | 0                                           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                      | 0                            | 3,618,548                                                 | 0                                        | 0                                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 1,649                  | 12                           | 3,328,229                                                 | 0                                        | 0                                           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                      | 0                            | 1,645,760                                                 | 0                                        | 0                                           | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 25,867                 | 473                          | 35,351,262                                                | 0                                        | 0                                           | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                      | 0                            | 5,259,732                                                 | 0                                        | 0                                           | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                      | 37                           | 12,412,310                                                | 0                                        | 0                                           | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                      | 0                            | 6,780,581                                                 | 0                                        | 0                                           | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 1,010                  | 5                            | 70,501,303                                                | 0                                        | 0                                           | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 107,226                | 17,537                       | 7,850,205                                                 | 0                                        | 68,194,861                                  | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 3,553                  | 0                            | 770,951                                                   | 0                                        | 4,624,237                                   | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 8,077                  | 205                          | 18,962,442                                                | 0                                        | 26,716,901                                  | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                      | 0                            | 374,287                                                   | 0                                        | 625,898                                     | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 3,376                  | 0                            | 6,576,230                                                 | 0                                        | 12,136,457                                  | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 5,093                  | 338                          | 1,473,577                                                 | 0                                        | 4,010,833                                   | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 1,552                  | 0                            | 10,936,110                                                | 0                                        | 19,017,134                                  | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 28,965                 | 0                            | 0                                                         | 0                                        | 3,118,080                                   | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 2,408                  | 55                           | 12,079,043                                                | 0                                        | 170,717,414                                 | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                      | 0                            | 4,946,084                                                 | 0                                        | 10,171,234                                  | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                      | 55                           | 11,760,317                                                | 0                                        | 17,677,308                                  | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                      | 0                            | 570,341                                                   | 0                                        | 707,478                                     | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               | 0                      | 0                            | 228,774                                                   | 0                                        | 266,388                                     | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                      | 895                          | 1,864,474                                                 | 0                                        | 2,700,630                                   | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                      | 455                          | 2,134,431                                                 | 0                                        | 3,320,552                                   | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                      | 0                            | 237,154                                                   | 0                                        | 89,811                                      | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                      | 0                            | 90,892                                                    | 0                                        | 1,767,111                                   | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                      | 0                            | 102,443                                                   | 0                                        | 1,638,667                                   | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                      | 293                          | 2,064,133                                                 | 0                                        | 2,034,084                                   | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                      | 0                            | 935,916                                                   | 0                                        | 2,726,071                                   | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                      | 0                            | 1,616,596                                                 | 0                                        | 11,885,460                                  | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                      | 1,026                        | 9,368,071                                                 | 0                                        | 163,306                                     | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                      | 0                            | 14,606,230                                                | 0                                        | 28,284,757                                  | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                      | 0                            | 3,666,678                                                 | 0                                        | 0                                           | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 4,501                  | 0                            | 43,936,272                                                | 0                                        | 64,214,251                                  | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                      | 342                          | 6,457,671                                                 | 0                                        | 11,102,699                                  | 22.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | CAPITAL RELATED COSTS  |                              | EMPLOYEE<br>BENEFITS<br>DEPARTMENT<br>(GROSS<br>SALARIES) | TRANSITION<br>RECRUITMENT<br>(TRANS/REC) | PARKING GARAGE<br>(DIRECT COST<br>RPSL/JRB) |        |
|----------------------------------------|-------|----------------------------------------|------------------------|------------------------------|-----------------------------------------------------------|------------------------------------------|---------------------------------------------|--------|
|                                        |       |                                        | INTEREST TOWER         | INTEREST PRO<br>BLDG NORTH   |                                                           |                                          |                                             |        |
|                                        |       |                                        | (SQUARE FEET<br>TOWER) | (SQUARE FEET<br>PRO BLDG NO) |                                                           |                                          |                                             |        |
|                                        |       |                                        | 2.07                   | 2.08                         | 4.00                                                      | 5.01                                     | 5.02                                        |        |
| 23.00                                  | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT       | 0                      | 224                          | 3,011,537                                                 | 0                                        | 10,683,426                                  | 23.00  |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 0                      | 0                            | 520,319                                                   | 0                                        | 733,428                                     | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                      | 0                            | 315,462                                                   | 0                                        | 456,846                                     | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                      | 629                          | 1,173,186                                                 | 0                                        | 1,787,752                                   | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                      | 220                          | 934,985                                                   | 0                                        | 1,356,247                                   | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                      | 0                            | 256,385                                                   | 0                                        | 0                                           | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                      | 0                            | 540,127                                                   | 0                                        | 172,509                                     | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                      | 0                            | 516,330                                                   | 0                                        | 741,087                                     | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                      | 0                            | 227,910                                                   | 0                                        | 365,473                                     | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                      | 0                            | 632,998                                                   | 0                                        | 0                                           | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                      | 0                            | 445,027                                                   | 0                                        | 640,816                                     | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                      | 0                            | 775,725                                                   | 0                                        | 1,221,765                                   | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                        |                              |                                                           |                                          |                                             |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 134,362                | 0                            | 55,471,639                                                | 0                                        | 100,331,454                                 | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 43,024                 | 0                            | 14,529,032                                                | 0                                        | 23,771,716                                  | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 42,148                 | 0                            | 16,452,310                                                | 0                                        | 27,065,781                                  | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                      | 0                            | 4,908,022                                                 | 0                                        | 7,946,371                                   | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 36,810                 | 0                            | 10,690,427                                                | 0                                        | 17,526,766                                  | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                      | 0                            | 4,386,271                                                 | 0                                        | 7,855,638                                   | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                      | 0                            | 4,150,579                                                 | 0                                        | 7,351,349                                   | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                      | 0                            | 1,825,095                                                 | 0                                        | 0                                           | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                        |                              |                                                           |                                          |                                             |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 84,363                 | 0                            | 15,400,849                                                | 0                                        | 122,293,187                                 | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 22,692                 | 0                            | 4,869,373                                                 | 0                                        | 8,696,641                                   | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 21,348                 | 0                            | 4,944,647                                                 | 0                                        | 8,729,123                                   | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 6,013                  | 0                            | 1,093,038                                                 | 0                                        | 10,662,708                                  | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 46,125                 | 8,068                        | 14,501,404                                                | 0                                        | 37,199,191                                  | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 922                    | 0                            | 3,380,578                                                 | 0                                        | 11,433,118                                  | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 6,012                  | 0                            | 771,983                                                   | 0                                        | 4,218,202                                   | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 10,673                 | 8,446                        | 24,623,453                                                | 0                                        | 68,123,692                                  | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                      | 0                            | 557,452                                                   | 0                                        | 1,852,804                                   | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 2,913                  | 0                            | 2,085,088                                                 | 0                                        | 11,403,766                                  | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                      | 0                            | 0                                                         | 0                                        | 1,577                                       | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 4,765                  | 0                            | 5,370,019                                                 | 0                                        | 11,118,827                                  | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 2,438                  | 0                            | 4,278,384                                                 | 0                                        | 6,480,418                                   | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 139                    | 0                            | 3,278,059                                                 | 0                                        | 5,049,908                                   | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 44                     | 0                            | 2,227,978                                                 | 0                                        | 3,722,121                                   | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 10,532                 | 0                            | 4,777,536                                                 | 0                                        | 26,087,502                                  | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 2,455                  | 0                            | 1,206,125                                                 | 0                                        | 1,830,595                                   | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                      | 0                            | 0                                                         | 0                                        | 3,350,004                                   | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 1,382                  | 0                            | 2,628,658                                                 | 0                                        | 4,144,400                                   | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                        |                              |                                                           |                                          |                                             |        |
| 90.00                                  | 09000 | CLINIC                                 | 69                     | 38,217                       | 25,451,096                                                | 0                                        | 81,698,533                                  | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 38,490                 | 0                            | 10,463,676                                                | 0                                        | 18,763,791                                  | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                        |                              |                                                           |                                          |                                             |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                        |                              |                                                           |                                          |                                             |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                      | 0                            | 1,458,036                                                 | 0                                        | 6,507,586                                   | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                      | 0                            | 732,161                                                   | 0                                        | 2,247,215                                   | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                      | 0                            | 73,449                                                    | 0                                        | 310,894                                     | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                      | 0                            | 0                                                         | 0                                        | 0                                           | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 711,264                | 77,948                       | 563,757,376                                               | 0                                        | 1,133,845,849                               | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                        |                              |                                                           |                                          |                                             |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 1,278                  | 1,405                        | 1,230,366                                                 | 0                                        | 4,944,212                                   | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                      | 0                            | 7,985,762                                                 | 0                                        | 11,399,664                                  | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                      | 0                            | 1,560,087                                                 | 0                                        | 2,355,733                                   | 190.02 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | CAPITAL RELATED COSTS |                           | EMPLOYEE BENEFITS DEPARTMENT (GROSS SALARIES) | TRANSITION RECRUITMENT (TRANS/REC) | PARKING GARAGE (DIRECT COST RPSL/JRB) |        |
|-------------------------|-------|--------------------------------------------------------|-----------------------|---------------------------|-----------------------------------------------|------------------------------------|---------------------------------------|--------|
|                         |       |                                                        | INTEREST TOWER        | INTEREST PRO BLDG NORTH   |                                               |                                    |                                       |        |
|                         |       |                                                        | (SQUARE FEET TOWER)   | (SQUARE FEET PRO BLDG NO) |                                               |                                    |                                       |        |
|                         |       |                                                        | 2.07                  | 2.08                      | 4.00                                          | 5.01                               | 5.02                                  |        |
| 191.00                  | 19100 | RESEARCH                                               | 0                     | 96                        | 22,810,634                                    | 0                                  | 41,353,441                            | 191.00 |
| 191.01                  | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY                    | 0                     | 232                       | 21,117,775                                    | 0                                  | 33,628,672                            | 191.01 |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 0                     | 140                       | 2,780,032                                     | 0                                  | 34,759,304                            | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 236                   | 66,735                    | 210,939,491                                   | 10,000                             | 348,040,731                           | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                     | 0                         | 15,779,032                                    | 0                                  | 34,906,982                            | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                     | 4,812                     | 8,000,985                                     | 0                                  | 58,176,025                            | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                     | 17,937                    | 873,719                                       | 0                                  | 3,414,441                             | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                     | 0                         | 9,862,695                                     | 0                                  | 37,153,942                            | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                     | 0                         | 112,823                                       | 0                                  | 210,910                               | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                       |                           |                                               |                                    |                                       | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                       |                           |                                               |                                    |                                       | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 0                     | 0                         | 203,474,639                                   | 86,171                             | -1,437,423                            | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 0.000000              | 0.000000                  | 0.234739                                      | 8.617100                           | 0.000000                              | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            |                       |                           | 357,499                                       | 0                                  | 4,431,481                             | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                |                       |                           | 0.000412                                      | 0.000000                           | 0.002541                              | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                       |                           |                                               |                                    |                                       | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                       |                           |                                               |                                    |                                       | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | RESEARCH<br>ADMINISTRATION<br><br>(PERCENT<br>RESEARCH FUND<br>O/H) | ADMIN & GEN<br>INPT SERVICE<br>(INPATIENT<br>REVENUE) | ADMIN & GEN<br>OUTPT SERVICE<br>(OUTPATIENT<br>REVENUE) | ADMIN & GEN<br>ANIMAL LAB<br>(RECHARGE<br>ANIMAL LAB) | ADMIN & GEN PT<br>SERVICE<br>(TOTAL<br>REVENUE) |       |
|------------------------------|-------|--------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------|-------|
|                              |       |                                      | 5.03                                                                | 5.04                                                  | 5.05                                                    | 5.06                                                  | 5.07                                            |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                                                     |                                                       |                                                         |                                                       |                                                 |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                                                                     |                                                       |                                                         |                                                       |                                                 | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                                                     |                                                       |                                                         |                                                       |                                                 | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                                                     |                                                       |                                                         |                                                       |                                                 | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                                                                     |                                                       |                                                         |                                                       |                                                 | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                                                                     |                                                       |                                                         |                                                       |                                                 | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                                                                     |                                                       |                                                         |                                                       |                                                 | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                                                                     |                                                       |                                                         |                                                       |                                                 | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                                                                     |                                                       |                                                         |                                                       |                                                 | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                                                                     |                                                       |                                                         |                                                       |                                                 | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                                                                     |                                                       |                                                         |                                                       |                                                 | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                                                                     |                                                       |                                                         |                                                       |                                                 | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                                                                     |                                                       |                                                         |                                                       |                                                 | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                                                                     |                                                       |                                                         |                                                       |                                                 | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              | 109,741,417                                                         |                                                       |                                                         |                                                       |                                                 | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             | 0                                                                   | 2,137,996,474                                         |                                                         |                                                       |                                                 | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            | 0                                                                   | 0                                                     | 1,882,286,549                                           |                                                       |                                                 | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               | 0                                                                   | 0                                                     | 0                                                       | 1,668,798                                             |                                                 | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 4,020,283,023                                   | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     | 0                                                                   | 0                                                     | 0                                                       | 320,353                                               | 0                                               | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 9.00  |
| 10.00                        | 01000 | DIETARY                              | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | RESEARCH<br>ADMINISTRATION<br><br>(PERCENT<br>RESEARCH FUND<br>O/H) | ADMIN & GEN<br>INPT SERVICE<br>(INPATIENT<br>REVENUE) | ADMIN & GEN<br>OUTPT SERVICE<br>(OUTPATIENT<br>REVENUE) | ADMIN & GEN<br>ANIMAL LAB<br>(RECHARGE<br>ANIMAL LAB) | ADMIN & GEN PT<br>SERVICE<br>(TOTAL<br>REVENUE) |        |
|----------------------------------------|-------|----------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------|--------|
|                                        |       |                                        | 5.03                                                                | 5.04                                                  | 5.05                                                    | 5.06                                                  | 5.07                                            |        |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                                     |                                                       |                                                         |                                                       |                                                 |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                                                   | 254,687,726                                           | 13,286,462                                              | 20                                                    | 267,974,188                                     | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                                                   | 78,386,521                                            | 92,982                                                  | 0                                                     | 78,479,503                                      | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                                                                   | 79,550,791                                            | 262,499                                                 | 0                                                     | 79,813,290                                      | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                                                   | 22,177,645                                            | 120,487                                                 | 0                                                     | 22,298,132                                      | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                                                   | 62,624,888                                            | 0                                                       | 0                                                     | 62,624,888                                      | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                                                   | 16,288,765                                            | 290                                                     | 0                                                     | 16,289,055                                      | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                                                   | 21,358,190                                            | 0                                                       | 0                                                     | 21,358,190                                      | 41.00  |
| 43.00                                  | 04300 | NURSEY                                 | 0                                                                   | 5,247,495                                             | 0                                                       | 0                                                     | 5,247,495                                       | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                                     |                                                       |                                                         |                                                       |                                                 |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                                                                   | 245,661,516                                           | 142,946,066                                             | 0                                                     | 388,607,582                                     | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                                                   | 19,276,134                                            | 17,868,433                                              | 0                                                     | 37,144,567                                      | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                                                   | 23,263,986                                            | 3,523,224                                               | 0                                                     | 26,787,210                                      | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                                                                   | 65,454,350                                            | 40,294,072                                              | 0                                                     | 105,748,422                                     | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                                                   | 164,632,224                                           | 167,326,723                                             | 0                                                     | 331,958,947                                     | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                                                   | 5,219,533                                             | 98,999,210                                              | 0                                                     | 104,218,743                                     | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                                                   | 4,651,397                                             | 22,326,196                                              | 0                                                     | 26,977,593                                      | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                                                                   | 225,309,885                                           | 279,852,283                                             | 0                                                     | 505,162,168                                     | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                                                   | 340,739                                               | 5,006,116                                               | 0                                                     | 5,346,855                                       | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                                                   | 39,526,062                                            | 12,250,627                                              | 0                                                     | 51,776,689                                      | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                                                   | 39,266,905                                            | 3,161,671                                               | 0                                                     | 42,428,576                                      | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                                                   | 46,160,760                                            | 1,056,910                                               | 0                                                     | 47,217,670                                      | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                                                   | 19,791,436                                            | 10,381,611                                              | 0                                                     | 30,173,047                                      | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                                                   | 17,246,416                                            | 3,428,694                                               | 0                                                     | 20,675,110                                      | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                                                   | 7,795,292                                             | 4,519,623                                               | 0                                                     | 12,314,915                                      | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                                                   | 58,932,565                                            | 55,573,877                                              | 0                                                     | 114,506,442                                     | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                                                   | 17,625,870                                            | 3,932,577                                               | 0                                                     | 21,558,447                                      | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                                                   | 81,820,757                                            | 37,387,041                                              | 0                                                     | 119,207,798                                     | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                                                   | 193,962,615                                           | 64,998,614                                              | 0                                                     | 258,961,229                                     | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                                                   | 239,291,260                                           | 503,643,018                                             | 0                                                     | 742,934,278                                     | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                                                   | 13,870,724                                            | 323,249                                                 | 0                                                     | 14,193,973                                      | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                                                   | 503                                                   | 537,790                                                 | 0                                                     | 538,293                                         | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                                     |                                                       |                                                         |                                                       |                                                 |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                                                                   | 1,176,349                                             | 267,524,697                                             | 0                                                     | 268,701,046                                     | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                                                   | 50,053,175                                            | 121,661,507                                             | 0                                                     | 171,714,682                                     | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                                     |                                                       |                                                         |                                                       |                                                 |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                                     |                                                       |                                                         |                                                       |                                                 |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                                                                   | 14,129,000                                            | 0                                                       | 0                                                     | 14,129,000                                      | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                                                                   | 2,790,000                                             | 0                                                       | 0                                                     | 2,790,000                                       | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                                                   | 425,000                                               | 0                                                       | 0                                                     | 425,000                                         | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 0                                                                   | 2,137,996,474                                         | 1,882,286,549                                           | 320,373                                               | 4,020,283,023                                   | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                                     |                                                       |                                                         |                                                       |                                                 |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 41,353,441                                                          | 0                                                     | 0                                                       | 0                                                     | 0                                               | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 33,628,672                                                          | 0                                                     | 0                                                       | 0                                                     | 0                                               | 191.01 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | RESEARCH<br>ADMINISTRATION<br><br>(PERCENT<br>RESEARCH FUND<br>O/H) | ADMIN & GEN<br>INPT SERVICE<br>(INPATIENT<br>REVENUE) | ADMIN & GEN<br>OUTPT SERVICE<br>(OUTPATIENT<br>REVENUE) | ADMIN & GEN<br>ANIMAL LAB<br>(RECHARGE<br>ANIMAL LAB) | ADMIN & GEN PT<br>SERVICE<br>(TOTAL<br>REVENUE) |        |
|-------------------------|-------|--------------------------------------------------------|---------------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------|-------------------------------------------------------|-------------------------------------------------|--------|
|                         |       |                                                        | 5.03                                                                | 5.04                                                  | 5.05                                                    | 5.06                                                  | 5.07                                            |        |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 34,759,304                                                          | 0                                                     | 0                                                       | 1,333,786                                             | 0                                               | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                                                                   | 0                                                     | 0                                                       | 14,639                                                | 0                                               | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                                                   | 0                                                     | 0                                                       | 0                                                     | 0                                               | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                                     |                                                       |                                                         |                                                       |                                                 | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                                                     |                                                       |                                                         |                                                       |                                                 | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 9,714,234                                                           | 6,753,034                                             | 4,413,571                                               | 1,181,311                                             | 90,717,800                                      | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 0.088519                                                            | 0.003159                                              | 0.002345                                                | 0.707881                                              | 0.022565                                        | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            | 135,920                                                             | 91,878                                                | 178,212                                                 | 492,443                                               | 2,978,305                                       | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                | 0.001239                                                            | 0.000043                                              | 0.000095                                                | 0.295088                                              | 0.000741                                        | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                                                     |                                                       |                                                         |                                                       |                                                 | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                                                     |                                                       |                                                         |                                                       |                                                 | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:

11/24/2019 4:22 pm

| Cost Center Description      |       | PERSONNEL<br>DEPARTMENT<br>(TOTAL FTES) | RESEARCH<br>FACULTY<br>(PERCENT OF<br>TIME) | RESEARCH SPA<br>(PERCENT<br>RESEARCH FUND<br>O/H) | Reconciliation | CORPORATE<br>ADMINISTRATION<br>(ACCUM. COST) |       |
|------------------------------|-------|-----------------------------------------|---------------------------------------------|---------------------------------------------------|----------------|----------------------------------------------|-------|
|                              |       | 5.08                                    | 5.09                                        | 5.10                                              | 5A.11          | 5.11                                         |       |
| GENERAL SERVICE COST CENTERS |       |                                         |                                             |                                                   |                |                                              |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT               |                                             |                                                   |                |                                              | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL               |                                             |                                                   |                |                                              | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG                |                                             |                                                   |                |                                              | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV                |                                             |                                                   |                |                                              | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH                |                                             |                                                   |                |                                              | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV                 |                                             |                                                   |                |                                              | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH             |                                             |                                                   |                |                                              | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH             |                                             |                                                   |                |                                              | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                    |                                             |                                                   |                |                                              | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY          |                                             |                                                   |                |                                              | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III               |                                             |                                                   |                |                                              | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                        |                                             |                                                   |                |                                              | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                        |                                             |                                                   |                |                                              | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT                  |                                             |                                                   |                |                                              | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS                |                                             |                                                   |                |                                              | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                    |                                             |                                                   |                |                                              | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                       |                                             |                                                   |                |                                              | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                      |                                             |                                                   |                |                                              | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP               |                                             |                                                   |                |                                              | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                        |                                             |                                                   |                |                                              | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                    |                                             |                                                   |                |                                              | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                      |                                             |                                                   |                |                                              | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH                 |                                             |                                                   |                |                                              | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                            |                                             |                                                   |                |                                              | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                   |                                             |                                                   |                |                                              | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                          |                                             |                                                   |                |                                              | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH                 |                                             |                                                   |                |                                              | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT            |                                             |                                                   |                |                                              | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT                  |                                             |                                                   |                |                                              | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                          |                                             |                                                   |                |                                              | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION                 |                                             |                                                   |                |                                              | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE                |                                             |                                                   |                |                                              | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE               |                                             |                                                   |                |                                              | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB                  |                                             |                                                   |                |                                              | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE                  |                                             |                                                   |                |                                              | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                    | 782,488                                     |                                                   |                |                                              | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                        | 0                                           | 10,000                                            |                |                                              | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                            | 0                                           | 0                                                 | 74,982,113     |                                              | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION                | 0                                           | 0                                                 | 0              | -147,578,234                                 | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                   | 13,071                                      | 0                                                 | 0              | 82,415,130                                   | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                      | 0                                           | 0                                                 | 0              | 0                                            | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE                 | 1,656                                       | 0                                                 | 0              | 4,209,562                                    | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                            | 39,987                                      | 0                                                 | 0              | 28,586,695                                   | 9.00  |
| 10.00                        | 01000 | DIETARY                                 | 724                                         | 0                                                 | 0              | 566,847                                      | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                    | 13,834                                      | 0                                                 | 0              | 11,289,607                                   | 10.01 |
| 11.00                        | 01100 | CAFETERIA                               | 3,398                                       | 0                                                 | 0              | 1,437,614                                    | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION                  | 9,943                                       | 0                                                 | 0              | 18,203,502                                   | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY               | 0                                           | 0                                                 | 0              | 1,409,601                                    | 14.00 |
| 15.00                        | 01500 | PHARMACY                                | 13,250                                      | 0                                                 | 0              | 21,344,897                                   | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY               | 6,683                                       | 0                                                 | 0              | 9,487,487                                    | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY               | 13,499                                      | 0                                                 | 0              | 17,105,469                                   | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED                  | 191                                         | 0                                                 | 0              | 515,754                                      | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED                  | 106                                         | 0                                                 | 0              | 153,319                                      | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                   | 1,163                                       | 0                                                 | 0              | 2,030,736                                    | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG                 | 1,845                                       | 0                                                 | 0              | 2,919,004                                    | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH                | 243                                         | 0                                                 | 0              | 114,634                                      | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH                 | 145                                         | 0                                                 | 0              | 1,198,214                                    | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD                 | 84                                          | 0                                                 | 0              | 1,640,830                                    | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT                | 0                                           | 0                                                 | 0              | 0                                            | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR                 | 1,228                                       | 0                                                 | 0              | 1,839,314                                    | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS                 | 1,037                                       | 0                                                 | 0              | 2,675,370                                    | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS                | 3,107                                       | 0                                                 | 0              | 600,861                                      | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT             | 10,851                                      | 0                                                 | 0              | 17,362,976                                   | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                    | 13,409                                      | 0                                                 | 0              | 20,651,304                                   | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS               | 1,873                                       | 0                                                 | 0              | 884,790                                      | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                          | 0                                           | 0                                                 | 0              | 21,844,736                                   | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD    | 74,141                                      | 0                                                 | 0              | 57,652,897                                   | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD    | 4,421                                       | 0                                                 | 0              | 9,666,028                                    | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT        | 2,254                                       | 0                                                 | 0              | 433,596                                      | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH          | 367                                         | 0                                                 | 0              | 321,533                                      | 23.01 |
| 23.02                        | 02302 | PARAMED DIETARY                         | 318                                         | 0                                                 | 0              | 498,064                                      | 23.02 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
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Worksheet B-1

Date/Time Prepared:

11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PERSONNEL<br>DEPARTMENT<br>(TOTAL FTES) | RESEARCH<br>FACULTY<br>(PERCENT OF<br>TIME) | RESEARCH SPA<br>(PERCENT<br>RESEARCH FUND<br>O/H) | Reconciliation | CORPORATE<br>ADMINISTRATION<br>(ACCUM. COST) |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------------------|---------------------------------------------|---------------------------------------------------|----------------|----------------------------------------------|--------|
|                                        |       |                                        | 5.08                                    | 5.09                                        | 5.10                                              | 5A.11          | 5.11                                         |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 1,100                                   | 0                                           | 0                                                 | 1,763,360      | 0                                            | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 986                                     | 0                                           | 0                                                 | 1,100,428      | 0                                            | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 347                                     | 0                                           | 0                                                 | 0              | 326,664                                      | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 941                                     | 0                                           | 0                                                 | 0              | 761,732                                      | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 561                                     | 0                                           | 0                                                 | 787,479        | 0                                            | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 196                                     | 0                                           | 0                                                 | 251,586        | 0                                            | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 1,040                                   | 0                                           | 0                                                 | 0              | 805,761                                      | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 397                                     | 0                                           | 0                                                 | 0              | 129,024                                      | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 722                                     | 0                                           | 0                                                 | 1,272,992      | 0                                            | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                         |                                             |                                                   |                |                                              |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 71,934                                  | 0                                           | 0                                                 | 0              | 94,591,410                                   | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 18,267                                  | 0                                           | 0                                                 | 0              | 24,381,108                                   | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 18,687                                  | 0                                           | 0                                                 | 0              | 27,047,926                                   | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 6,157                                   | 0                                           | 0                                                 | 0              | 8,093,593                                    | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 12,896                                  | 0                                           | 0                                                 | 0              | 17,781,852                                   | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 6,165                                   | 0                                           | 0                                                 | 0              | 6,923,332                                    | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 5,350                                   | 0                                           | 0                                                 | 0              | 6,588,009                                    | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 2,060                                   | 0                                           | 0                                                 | 0              | 4,463,214                                    | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                         |                                             |                                                   |                |                                              |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 21,855                                  | 0                                           | 0                                                 | 0              | 42,538,859                                   | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 5,718                                   | 0                                           | 0                                                 | 0              | 8,751,594                                    | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 5,714                                   | 0                                           | 0                                                 | 0              | 8,710,733                                    | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 1,784                                   | 0                                           | 0                                                 | 0              | 8,175,325                                    | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 16,938                                  | 0                                           | 0                                                 | 0              | 34,158,976                                   | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 3,484                                   | 0                                           | 0                                                 | 0              | 12,866,795                                   | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 767                                     | 0                                           | 0                                                 | 0              | 4,719,098                                    | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 32,433                                  | 0                                           | 0                                                 | 0              | 74,918,914                                   | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 592                                     | 0                                           | 0                                                 | 0              | 1,933,912                                    | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    |                                         |                                             |                                                   |                |                                              | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 2,628                                   | 0                                           | 0                                                 | 0              | 12,353,883                                   | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                       | 0                                           | 0                                                 | 0              | 1,090,202                                    | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 6,998                                   | 0                                           | 0                                                 | 0              | 12,158,874                                   | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 5,277                                   | 0                                           | 0                                                 | 0              | 6,705,069                                    | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 3,885                                   | 0                                           | 0                                                 | 0              | 5,013,883                                    | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 2,531                                   | 0                                           | 0                                                 | 0              | 3,604,952                                    | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 5,964                                   | 0                                           | 0                                                 | 0              | 9,963,935                                    | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 1,953                                   | 0                                           | 0                                                 | 0              | 2,311,692                                    | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                       | 0                                           | 0                                                 | 0              | 38,141,676                                   | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                       | 0                                           | 0                                                 | 0              | 83,283,230                                   | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                       | 0                                           | 0                                                 | 0              | 166,204,079                                  | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                       | 0                                           | 0                                                 | 0              | 0                                            | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                       | 0                                           | 0                                                 | 0              | 3,732,642                                    | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 3,810                                   | 0                                           | 0                                                 | 0              | 3,928,492                                    | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                         |                                             |                                                   |                |                                              |        |
| 90.00                                  | 09000 | CLINIC                                 | 42,823                                  | 0                                           | 0                                                 | 0              | 81,182,307                                   | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 13,484                                  | 0                                           | 0                                                 | 0              | 21,359,812                                   | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   |                                         |                                             |                                                   |                |                                              | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                       | 0                                           | 0                                                 | 0              | 0                                            | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                       | 0                                           | 0                                                 | 0              | 0                                            | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                         |                                             |                                                   |                |                                              |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                       | 0                                           | 0                                                 | 0              | 0                                            | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                       | 0                                           | 0                                                 | 0              | 0                                            | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                       | 0                                           | 0                                                 | 0              | 0                                            | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                         |                                             |                                                   |                |                                              |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 1,708                                   | 0                                           | 0                                                 | 0              | 6,711,512                                    | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                       | 0                                           | 0                                                 | 0              | 0                                            | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 679                                     | 0                                           | 0                                                 | 0              | 2,174,924                                    | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                       | 0                                           | 0                                                 | 0              | 0                                            | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 45                                      | 0                                           | 0                                                 | 0              | 308,973                                      | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                       | 0                                           | 0                                                 | 0              | 0                                            | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               |                                         |                                             |                                                   |                |                                              | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 561,704                                 | 0                                           | 0                                                 | -119,137,195   | 1,164,693,145                                | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                         |                                             |                                                   |                |                                              |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 1,140                                   | 0                                           | 0                                                 | 0              | 4,625,276                                    | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 6,692                                   | 0                                           | 0                                                 | 0              | 11,539,334                                   | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 2,050                                   | 0                                           | 0                                                 | 0              | 2,479,941                                    | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 28,453                                  | 0                                           | 41,353,441                                        | 0              | 62,688,316                                   | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 27,949                                  | 0                                           | 33,628,672                                        | 0              | 46,403,180                                   | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 1,920                                   | 10,000                                      | 0                                                 | 0              | 28,183,779                                   | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 122,863                                 | 0                                           | 0                                                 | 0              | 309,063,211                                  | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 11,129                                  | 0                                           | 0                                                 | 0              | 27,857,503                                   | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 9,286                                   | 0                                           | 0                                                 | 0              | 58,135,274                                   | 194.01 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | PERSONNEL<br>DEPARTMENT<br>(TOTAL FTES) | RESEARCH<br>FACULTY<br>(PERCENT OF<br>TIME) | RESEARCH SPA<br>(PERCENT<br>RESEARCH FUND<br>O/H) | Reconciliation | CORPORATE<br>ADMINISTRATION<br>(ACCUM. COST) |        |
|-------------------------|-------|--------------------------------------------------------|-----------------------------------------|---------------------------------------------|---------------------------------------------------|----------------|----------------------------------------------|--------|
|                         |       |                                                        | 5.08                                    | 5.09                                        | 5.10                                              | 5A.11          | 5.11                                         |        |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 2,428                                   | 0                                           | 0                                                 | 0              | 2,755,941                                    | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 6,709                                   | 0                                           | 0                                                 | 0              | 37,595,877                                   | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 165                                     | 0                                           | 0                                                 | 0              | 215,736                                      | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                         |                                             |                                                   |                |                                              | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                         |                                             |                                                   |                |                                              | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 10,059,245                              | 17,729,021                                  | 10,209,220                                        |                | 147,578,234                                  | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 12.855462                               | 1,772.902100                                | 0.136155                                          |                | 0.084031                                     | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            | 156,920                                 | 129,275                                     | 338,012                                           |                | 3,097,233                                    | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                | 0.200540                                | 12.927500                                   | 0.004508                                          |                | 0.001764                                     | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                         |                                             |                                                   |                |                                              | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                         |                                             |                                                   |                |                                              | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | MAINTENANCE &<br>REPAIRS<br>(SQUARE FEET<br>ALL BLDGS) | RENTED SPACE<br>COSTS<br>(PERCENT) | LAUNDRY &<br>LINEN SERVICE<br>(RECHARGE<br>LAUNDRY) | HOUSEKEEPING<br>(SQUARE FEET<br>ALL BLDGS) | DIETARY<br>(TIME STUDY<br>DIETARY SPLIT) |              |
|------------------------------|-------|--------------------------------------------------------|------------------------------------|-----------------------------------------------------|--------------------------------------------|------------------------------------------|--------------|
|                              |       | 6.00                                                   | 6.01                               | 8.00                                                | 9.00                                       | 10.00                                    |              |
| GENERAL SERVICE COST CENTERS |       |                                                        |                                    |                                                     |                                            |                                          |              |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT                              |                                    |                                                     |                                            |                                          | 1.00         |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL                              |                                    |                                                     |                                            |                                          | 1.01         |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG                               |                                    |                                                     |                                            |                                          | 1.02         |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV                               |                                    |                                                     |                                            |                                          | 1.03         |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH                               |                                    |                                                     |                                            |                                          | 1.04         |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV                                |                                    |                                                     |                                            |                                          | 1.05         |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH                            |                                    |                                                     |                                            |                                          | 1.06         |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH                            |                                    |                                                     |                                            |                                          | 1.07         |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                                   |                                    |                                                     |                                            |                                          | 1.08         |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY                         |                                    |                                                     |                                            |                                          | 1.09         |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III                              |                                    |                                                     |                                            |                                          | 1.10         |
| 1.11                         | 00111 | DEPRECIATION JRB                                       |                                    |                                                     |                                            |                                          | 1.11         |
| 1.12                         | 00112 | DEPRECIATION TOB                                       |                                    |                                                     |                                            |                                          | 1.12         |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT                                 |                                    |                                                     |                                            |                                          | 1.13         |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS                               |                                    |                                                     |                                            |                                          | 1.14         |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                                   |                                    |                                                     |                                            |                                          | 1.15         |
| 1.16                         | 00116 | DEPRECIATION COHN                                      |                                    |                                                     |                                            |                                          | 1.16         |
| 1.17                         | 00117 | DEPRECIATION TOWER                                     |                                    |                                                     |                                            |                                          | 1.17         |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP                              |                                    |                                                     |                                            |                                          | 2.00         |
| 2.01                         | 00201 | INTEREST GENERAL                                       |                                    |                                                     |                                            |                                          | 2.01         |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                                   |                                    |                                                     |                                            |                                          | 2.02         |
| 2.03                         | 00203 | INTEREST ATRUM PAV                                     |                                    |                                                     |                                            |                                          | 2.03         |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH                                |                                    |                                                     |                                            |                                          | 2.04         |
| 2.05                         | 00205 | INTEREST TOB                                           |                                    |                                                     |                                            |                                          | 2.05         |
| 2.06                         | 00206 | INTEREST PRO BLDG III                                  |                                    |                                                     |                                            |                                          | 2.06         |
| 2.07                         | 00207 | INTEREST TOWER                                         |                                    |                                                     |                                            |                                          | 2.07         |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH                                |                                    |                                                     |                                            |                                          | 2.08         |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT                           |                                    |                                                     |                                            |                                          | 4.00         |
| 5.01                         | 00590 | TRANSITION RECRUITMENT                                 |                                    |                                                     |                                            |                                          | 5.01         |
| 5.02                         | 00540 | PARKING GARAGE                                         |                                    |                                                     |                                            |                                          | 5.02         |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION                                |                                    |                                                     |                                            |                                          | 5.03         |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE                               |                                    |                                                     |                                            |                                          | 5.04         |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE                              |                                    |                                                     |                                            |                                          | 5.05         |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB                                 |                                    |                                                     |                                            |                                          | 5.06         |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE                                 |                                    |                                                     |                                            |                                          | 5.07         |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                                   |                                    |                                                     |                                            |                                          | 5.08         |
| 5.09                         | 00597 | RESEARCH FACULTY                                       |                                    |                                                     |                                            |                                          | 5.09         |
| 5.10                         | 00598 | RESEARCH SPA                                           |                                    |                                                     |                                            |                                          | 5.10         |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION                               |                                    |                                                     |                                            |                                          | 5.11         |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                                  | 2,077,998                          |                                                     |                                            |                                          | 6.00         |
| 6.01                         | 00601 | RENTED SPACE COSTS                                     | 0                                  | 10,000                                              |                                            |                                          | 6.01         |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE                                | 8,751                              | 0                                                   | 1,792,055                                  |                                          | 8.00         |
| 9.00                         | 00900 | HOUSEKEEPING                                           | 52,490                             | 0                                                   | 0                                          | 2,016,757                                | 9.00         |
| 10.00                        | 01000 | DIETARY                                                | 4,723                              | 0                                                   | 0                                          | 4,723                                    | 10,000 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                                   | 25,703                             | 0                                                   | 0                                          | 25,703                                   | 8,007 10.01  |
| 11.00                        | 01100 | CAFETERIA                                              | 37,680                             | 0                                                   | 0                                          | 37,680                                   | 1,993 11.00  |
| 13.00                        | 01300 | NURSING ADMINISTRATION                                 | 14,181                             | 0                                                   | 0                                          | 14,181                                   | 0 13.00      |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY                              | 34,406                             | 0                                                   | 0                                          | 34,406                                   | 0 14.00      |
| 15.00                        | 01500 | PHARMACY                                               | 16,994                             | 0                                                   | 0                                          | 16,994                                   | 0 15.00      |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY                              | 12,248                             | 0                                                   | 0                                          | 12,248                                   | 0 16.00      |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY                              | 10,667                             | 0                                                   | 0                                          | 10,667                                   | 0 16.01      |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED                                 | 0                                  | 0                                                   | 0                                          | 0                                        | 0 18.00      |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED                                 | 378                                | 0                                                   | 0                                          | 378                                      | 0 18.01      |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                                  | 6,209                              | 0                                                   | 0                                          | 6,209                                    | 0 18.02      |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG                                | 4,379                              | 0                                                   | 0                                          | 4,379                                    | 0 18.03      |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH                               | 0                                  | 0                                                   | 0                                          | 0                                        | 0 18.04      |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH                                | 13,472                             | 0                                                   | 0                                          | 13,472                                   | 0 18.05      |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD                                | 0                                  | 0                                                   | 0                                          | 0                                        | 0 18.06      |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT                               | 0                                  | 0                                                   | 0                                          | 0                                        | 0 18.07      |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR                                | 501                                | 0                                                   | 0                                          | 501                                      | 0 18.08      |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS                                | 1,044                              | 0                                                   | 0                                          | 1,044                                    | 0 18.09      |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS                               | 3,696                              | 0                                                   | 0                                          | 3,696                                    | 0 18.12      |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT                            | 104,089                            | 0                                                   | 0                                          | 104,089                                  | 0 18.14      |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                                   | 18,082                             | 0                                                   | 0                                          | 18,082                                   | 0 18.16      |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS                              | 0                                  | 0                                                   | 0                                          | 0                                        | 0 19.00      |
| 20.00                        | 02000 | NURSING SCHOOL                                         | 0                                  | 0                                                   | 0                                          | 0                                        | 0 20.00      |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD                   | 20,010                             | 0                                                   | 0                                          | 20,010                                   | 0 21.00      |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD                   | 12,477                             | 0                                                   | 0                                          | 12,477                                   | 0 22.00      |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT                       | 5,674                              | 0                                                   | 0                                          | 5,674                                    | 0 23.00      |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH                         | 296                                | 0                                                   | 0                                          | 296                                      | 0 23.01      |
| 23.02                        | 02302 | PARAMED DIETARY                                        | 976                                | 0                                                   | 0                                          | 976                                      | 0 23.02      |

## COST ALLOCATION - STATISTICAL BASIS

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| Cost Center Description                |       |                                        | MAINTENANCE &<br>REPAIRS<br>(SQUARE FEET<br>ALL BLDGS) | RENTED SPACE<br>COSTS<br>(PERCENT) | LAUNDRY &<br>LINEN SERVICE<br>(RECHARGE<br>LAUNDRY) | HOUSEKEEPING<br>(SQUARE FEET<br>ALL BLDGS) | DIETARY<br>(TIME STUDY<br>DIETARY SPLIT) |        |
|----------------------------------------|-------|----------------------------------------|--------------------------------------------------------|------------------------------------|-----------------------------------------------------|--------------------------------------------|------------------------------------------|--------|
|                                        |       |                                        | 6.00                                                   | 6.01                               | 8.00                                                | 9.00                                       | 10.00                                    |        |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 3,998                                                  | 0                                  | 0                                                   | 3,998                                      | 0                                        | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 2,020                                                  | 0                                  | 0                                                   | 2,020                                      | 0                                        | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 545                                                    | 0                                  | 0                                                   | 545                                        | 0                                        | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 2,612                                                  | 0                                  | 0                                                   | 2,612                                      | 0                                        | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 912                                                    | 0                                  | 0                                                   | 912                                        | 0                                        | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 184                                                    | 0                                  | 0                                                   | 184                                        | 0                                        | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 162                                                    | 0                                  | 0                                                   | 162                                        | 0                                        | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 999                                                    | 0                                  | 0                                                   | 999                                        | 0                                        | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 750                                                    | 0                                  | 0                                                   | 750                                        | 0                                        | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                        |                                    |                                                     |                                            |                                          |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 244,843                                                | 0                                  | 427,954                                             | 244,843                                    | 0                                        | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 43,024                                                 | 0                                  | 40,703                                              | 43,024                                     | 0                                        | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 45,608                                                 | 0                                  | 78,173                                              | 45,608                                     | 0                                        | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 12,947                                                 | 0                                  | 0                                                   | 12,947                                     | 0                                        | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 36,810                                                 | 0                                  | 20,935                                              | 36,810                                     | 0                                        | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 26,388                                                 | 0                                  | 53,727                                              | 26,388                                     | 0                                        | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 24,341                                                 | 0                                  | 92,213                                              | 24,341                                     | 0                                        | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 14,697                                                 | 0                                  | 53,144                                              | 14,697                                     | 0                                        | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                        |                                    |                                                     |                                            |                                          |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 118,362                                                | 0                                  | 160,665                                             | 118,362                                    | 0                                        | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 30,362                                                 | 0                                  | 0                                                   | 30,362                                     | 0                                        | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 21,348                                                 | 0                                  | 0                                                   | 21,348                                     | 0                                        | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 16,133                                                 | 0                                  | 0                                                   | 16,133                                     | 0                                        | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 81,086                                                 | 0                                  | 232,980                                             | 81,086                                     | 0                                        | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 23,037                                                 | 0                                  | 0                                                   | 23,037                                     | 0                                        | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 6,012                                                  | 0                                  | 54,509                                              | 6,012                                      | 0                                        | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 94,077                                                 | 0                                  | 69,963                                              | 94,077                                     | 0                                        | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 1,441                                                  | 0                                  | 0                                                   | 1,441                                      | 0                                        | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 5,021                                                  | 0                                  | 0                                                   | 5,021                                      | 0                                        | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 6,708                                                  | 0                                  | 0                                                   | 6,708                                      | 0                                        | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 12,487                                                 | 0                                  | 20,858                                              | 12,487                                     | 0                                        | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 11,219                                                 | 0                                  | 7,640                                               | 11,219                                     | 0                                        | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 7,533                                                  | 0                                  | 0                                                   | 7,533                                      | 0                                        | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 14,872                                                 | 0                                  | 0                                                   | 14,872                                     | 0                                        | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 2,455                                                  | 0                                  | 0                                                   | 2,455                                      | 0                                        | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 2,080                                                  | 0                                  | 0                                                   | 2,080                                      | 0                                        | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 6,435                                                  | 0                                  | 0                                                   | 6,435                                      | 0                                        | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                        |                                    |                                                     |                                            |                                          |        |
| 90.00                                  | 09000 | CLINIC                                 | 132,704                                                | 0                                  | 0                                                   | 132,704                                    | 0                                        | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 50,832                                                 | 0                                  | 436,688                                             | 50,832                                     | 0                                        | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                        |                                    |                                                     |                                            |                                          |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                        |                                    |                                                     |                                            |                                          |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 1,639                                                  | 0                                  | 0                                                   | 1,639                                      | 0                                        | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 506                                                    | 0                                  | 0                                                   | 506                                        | 0                                        | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 4                                                      | 0                                  | 0                                                   | 4                                          | 0                                        | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 1,516,319                                              | 0                                  | 1,750,152                                           | 1,455,078                                  | 10,000                                   | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                        |                                    |                                                     |                                            |                                          |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 37,457                                                 | 0                                  | 41,903                                              | 37,457                                     | 0                                        | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 151,111                                                | 0                                  | 0                                                   | 151,111                                    | 0                                        | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 10,201                                                 | 0                                  | 0                                                   | 10,201                                     | 0                                        | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 24,269                                                 | 10,000                             | 0                                                   | 24,269                                     | 0                                        | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 279,626                                                | 0                                  | 0                                                   | 279,626                                    | 0                                        | 192.00 |
| 194.00                                 | 07950 | MEDICAL COLLEGE                        | 24,774                                                 | 0                                  | 0                                                   | 24,774                                     | 0                                        | 194.00 |
| 194.01                                 | 07951 | AFFIL CORP ARC VENTURES                | 7,518                                                  | 0                                  | 0                                                   | 7,518                                      | 0                                        | 194.01 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | MAINTENANCE &<br>REPAIRS<br>(SQUARE FEET<br>ALL BLDGS) | RENTED SPACE<br>COSTS<br>(PERCENT) | LAUNDRY &<br>LINEN SERVICE<br>(RECHARGE<br>LAUNDRY) | HOUSEKEEPING<br>(SQUARE FEET<br>ALL BLDGS) | DIETARY<br>(TIME STUDY<br>DIETARY SPLIT) |        |
|-------------------------|-------|--------------------------------------------------------|--------------------------------------------------------|------------------------------------|-----------------------------------------------------|--------------------------------------------|------------------------------------------|--------|
|                         |       |                                                        | 6.00                                                   | 6.01                               | 8.00                                                | 9.00                                       | 10.00                                    |        |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 26,723                                                 | 0                                  | 0                                                   | 26,723                                     | 0                                        | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                                      | 0                                  | 0                                                   | 0                                          | 0                                        | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                        |                                    |                                                     |                                            |                                          | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                                        |                                    |                                                     |                                            |                                          | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 89,340,556                                             | 0                                  | 4,939,533                                           | 33,245,597                                 | 895,396                                  | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 42.993572                                              | 0.000000                           | 2.756351                                            | 16.484682                                  | 89.539600                                | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            | 17,201,468                                             | 0                                  | 367,909                                             | 2,026,865                                  | 121,749                                  | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                | 8.277904                                               | 0.000000                           | 0.205300                                            | 1.005012                                   | 12.174900                                | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                                        |                                    |                                                     |                                            |                                          | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                                        |                                    |                                                     |                                            |                                          | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | PATIENT FOOD<br>SERVICE<br>(MEALS SERVED) | CAFETERIA<br>(FTES ON<br>CAMPUS) | NURSING<br>ADMINISTRATION<br>(FTES NURSING<br>ADMIN) | CENTRAL<br>SERVICES &<br>SUPPLY<br>(RECHARGE<br>SUPPLIES) | PHARMACY<br>(RECHARGE<br>DRUGS) |       |
|------------------------------|-------|--------------------------------------|-------------------------------------------|----------------------------------|------------------------------------------------------|-----------------------------------------------------------|---------------------------------|-------|
|                              |       |                                      | 10.01                                     | 11.00                            | 13.00                                                | 14.00                                                     | 15.00                           |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                           |                                  |                                                      |                                                           |                                 |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                           |                                  |                                                      |                                                           |                                 | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                           |                                  |                                                      |                                                           |                                 | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                           |                                  |                                                      |                                                           |                                 | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                           |                                  |                                                      |                                                           |                                 | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                           |                                  |                                                      |                                                           |                                 | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                           |                                  |                                                      |                                                           |                                 | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                           |                                  |                                                      |                                                           |                                 | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                           |                                  |                                                      |                                                           |                                 | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                           |                                  |                                                      |                                                           |                                 | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                           |                                  |                                                      |                                                           |                                 | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                                           |                                  |                                                      |                                                           |                                 | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                                           |                                  |                                                      |                                                           |                                 | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                                           |                                  |                                                      |                                                           |                                 | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                                           |                                  |                                                      |                                                           |                                 | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                                           |                                  |                                                      |                                                           |                                 | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                                           |                                  |                                                      |                                                           |                                 | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                                           |                                  |                                                      |                                                           |                                 | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                                           |                                  |                                                      |                                                           |                                 | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                           |                                  |                                                      |                                                           |                                 | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                           |                                  |                                                      |                                                           |                                 | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                                           |                                  |                                                      |                                                           |                                 | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                                           |                                  |                                                      |                                                           |                                 | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                                           |                                  |                                                      |                                                           |                                 | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                                           |                                  |                                                      |                                                           |                                 | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                                           |                                  |                                                      |                                                           |                                 | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                                           |                                  |                                                      |                                                           |                                 | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                                           |                                  |                                                      |                                                           |                                 | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                                           |                                  |                                                      |                                                           |                                 | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                                           |                                  |                                                      |                                                           |                                 | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                                           |                                  |                                                      |                                                           |                                 | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                                           |                                  |                                                      |                                                           |                                 | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                                           |                                  |                                                      |                                                           |                                 | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                                           |                                  |                                                      |                                                           |                                 | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                                           |                                  |                                                      |                                                           |                                 | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                                           |                                  |                                                      |                                                           |                                 | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                                           |                                  |                                                      |                                                           |                                 | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                                           |                                  |                                                      |                                                           |                                 | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                                           |                                  |                                                      |                                                           |                                 | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                                           |                                  |                                                      |                                                           |                                 | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                                           |                                  |                                                      |                                                           |                                 | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                                           |                                  |                                                      |                                                           |                                 | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                                           |                                  |                                                      |                                                           |                                 | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                                           |                                  |                                                      |                                                           |                                 | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                                           |                                  |                                                      |                                                           |                                 | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 | 450,704                                   |                                  |                                                      |                                                           |                                 | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            | 0                                         | 680,285                          |                                                      |                                                           |                                 | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               | 0                                         | 9,943                            | 167,871                                              |                                                           |                                 | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            | 0                                         | 0                                | 0                                                    | 74,012,455                                                |                                 | 14.00 |
| 15.00                        | 01500 | PHARMACY                             | 0                                         | 13,250                           | 0                                                    | 144,046                                                   | 193,938,208                     | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            | 0                                         | 6,683                            | 0                                                    | 0                                                         | 0                               | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            | 0                                         | 13,499                           | 0                                                    | 99                                                        | 242                             | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               | 0                                         | 191                              | 0                                                    | 0                                                         | 0                               | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED               | 0                                         | 106                              | 0                                                    | 557                                                       | 0                               | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                | 0                                         | 1,163                            | 0                                                    | 0                                                         | 0                               | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 0                                         | 1,845                            | 0                                                    | 2,207                                                     | 0                               | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                                         | 243                              | 0                                                    | 0                                                         | 0                               | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                                         | 145                              | 0                                                    | 60                                                        | 0                               | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                                         | 84                               | 0                                                    | 0                                                         | 0                               | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                                         | 1,228                            | 0                                                    | 0                                                         | 0                               | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                                         | 1,037                            | 0                                                    | 49                                                        | 0                               | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                                         | 3,107                            | 0                                                    | 0                                                         | 0                               | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                                         | 10,851                           | 0                                                    | 23,223                                                    | 20,575                          | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                                         | 13,409                           | 0                                                    | 6,942                                                     | 30                              | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 0                                         | 1,873                            | 1,873                                                | 0                                                         | 0                               | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                         | 74,141                           | 0                                                    | 19,487                                                    | 0                               | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                         | 4,421                            | 0                                                    | 12,235                                                    | 141                             | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                                         | 2,254                            | 0                                                    | 0                                                         | 0                               | 23.00 |
| 23.01                        | 02301 | PARAMED MEDICAL PERFUSION TECH       | 0                                         | 367                              | 0                                                    | 16,118                                                    | 0                               | 23.01 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
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11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PATIENT FOOD<br>SERVICE<br>(MEALS SERVED) | CAFETERIA<br>(FTES ON<br>CAMPUS) | NURSING<br>ADMINISTRATION<br>(FTES NURSING<br>ADMIN) | CENTRAL<br>SERVICES &<br>SUPPLY<br>(RECHARGE<br>SUPPLIES) | PHARMACY<br>(RECHARGE<br>DRUGS) |        |
|----------------------------------------|-------|----------------------------------------|-------------------------------------------|----------------------------------|------------------------------------------------------|-----------------------------------------------------------|---------------------------------|--------|
|                                        |       |                                        | 10.01                                     | 11.00                            | 13.00                                                | 14.00                                                     | 15.00                           |        |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                                         | 318                              | 0                                                    | 0                                                         | 0                               | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                                         | 1,100                            | 0                                                    | 0                                                         | 0                               | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                                         | 986                              | 0                                                    | 794                                                       | 0                               | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                                         | 347                              | 347                                                  | 0                                                         | 0                               | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                                         | 941                              | 0                                                    | 0                                                         | 0                               | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                                         | 561                              | 0                                                    | 0                                                         | 0                               | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                                         | 196                              | 0                                                    | 0                                                         | 0                               | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                                         | 1,040                            | 1,040                                                | 0                                                         | 0                               | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                                         | 397                              | 0                                                    | 143                                                       | 0                               | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                                         | 722                              | 0                                                    | 21,707                                                    | 0                               | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                           |                                  |                                                      |                                                           |                                 |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 324,810                                   | 71,934                           | 52,343                                               | 4,846,577                                                 | 6,638                           | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 33,170                                    | 18,267                           | 15,758                                               | 1,822,644                                                 | 37                              | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 34,912                                    | 18,687                           | 15,304                                               | 1,626,806                                                 | 34                              | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 9,110                                     | 6,157                            | 5,304                                                | 664,462                                                   | 328                             | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                         | 12,896                           | 11,894                                               | 775,634                                                   | 0                               | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 21,024                                    | 6,165                            | 3,539                                                | 15,449                                                    | 1                               | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 27,678                                    | 5,350                            | 3,444                                                | 158,274                                                   | 2                               | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                         | 2,060                            | 2,060                                                | 0                                                         | 0                               | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                           |                                  |                                                      |                                                           |                                 |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                                         | 21,855                           | 13,640                                               | 27,713,172                                                | 9,398                           | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                         | 5,718                            | 4,932                                                | 222,367                                                   | 5                               | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                         | 5,714                            | 4,396                                                | 536,206                                                   | 51                              | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                                         | 1,784                            | 0                                                    | 2,010,718                                                 | 154,256                         | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                         | 16,938                           | 1,637                                                | 3,601,458                                                 | 69,803                          | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                         | 3,484                            | 0                                                    | 149,994                                                   | 1,129                           | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                         | 767                              | 0                                                    | 32,768                                                    | 7,208                           | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                                         | 32,433                           | 4,220                                                | 2,634,068                                                 | 43,582                          | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                         | 592                              | 0                                                    | 0                                                         | 0                               | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                         | 2,628                            | 366                                                  | 183,142                                                   | 32,824                          | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                         | 0                                | 0                                                    | 1,662                                                     | 0                               | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                         | 6,998                            | 0                                                    | 1,215,734                                                 | 2,764                           | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                         | 5,277                            | 0                                                    | 87,063                                                    | 0                               | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                         | 3,885                            | 0                                                    | 69,250                                                    | 106                             | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                         | 2,531                            | 0                                                    | 191,608                                                   | 0                               | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                         | 5,964                            | 2,394                                                | 6,151,713                                                 | 0                               | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                         | 1,953                            | 0                                                    | 100,734                                                   | 0                               | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                         | 0                                | 0                                                    | 317,474                                                   | 0                               | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                         | 0                                | 0                                                    | 0                                                         | 148,003,187                     | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                         | 0                                | 0                                                    | 77,645                                                    | 0                               | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                         | 3,810                            | 101                                                  | 16,037                                                    | 0                               | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                           |                                  |                                                      |                                                           |                                 |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                                         | 39,654                           | 12,825                                               | 1,960,738                                                 | 32,731,456                      | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                         | 13,484                           | 9,726                                                | 962,532                                                   | 85                              | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                           |                                  |                                                      |                                                           |                                 |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                           |                                  |                                                      |                                                           |                                 |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                                         | 1,708                            | 524                                                  | 0                                                         | 0                               | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                                         | 679                              | 199                                                  | 0                                                         | 0                               | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                         | 45                               | 5                                                    | 0                                                         | 0                               | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                         | 0                                | 0                                                    | 0                                                         | 0                               | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 450,704                                   | 485,865                          | 167,871                                              | 58,393,596                                                | 181,083,882                     | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                           |                                  |                                                      |                                                           |                                 |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                         | 1,140                            | 0                                                    | 0                                                         | 0                               | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                         | 6,692                            | 0                                                    | 57                                                        | 0                               | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                         | 2,050                            | 0                                                    | 871                                                       | 0                               | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                                         | 28,453                           | 0                                                    | 0                                                         | 0                               | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                                         | 27,949                           | 0                                                    | 0                                                         | 0                               | 191.01 |
| 191.02                                 | 19102 | DEPARTMENTAL PROJECTS/RESEARCH         | 0                                         | 1,920                            | 0                                                    | 145,894                                                   | 310,352                         | 191.02 |
| 192.00                                 | 19200 | PHYSICIANS' PRIVATE OFFICES            | 0                                         | 100,740                          | 0                                                    | 2,717,631                                                 | 10,245,922                      | 192.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | PATIENT FOOD<br>SERVICE<br>(MEALS SERVED) | CAFETERIA<br>(FTES ON<br>CAMPUS) | NURSING<br>ADMINISTRATION<br>(FTES NURSING<br>ADMIN) | CENTRAL<br>SERVICES &<br>SUPPLY<br>(RECHARGE<br>SUPPLIES) | PHARMACY<br>(RECHARGE<br>DRUGS) |        |
|-------------------------|-------|--------------------------------------------------------|-------------------------------------------|----------------------------------|------------------------------------------------------|-----------------------------------------------------------|---------------------------------|--------|
|                         |       |                                                        | 10.01                                     | 11.00                            | 13.00                                                | 14.00                                                     | 15.00                           |        |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                                         | 11,129                           | 0                                                    | 12                                                        | 0                               | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                                         | 5,045                            | 0                                                    | 259,112                                                   | 2,298,052                       | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                         | 2,428                            | 0                                                    | 0                                                         | 0                               | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                         | 6,709                            | 0                                                    | 12,495,282                                                | 0                               | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                         | 165                              | 0                                                    | 0                                                         | 0                               | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                           |                                  |                                                      |                                                           |                                 | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                           |                                  |                                                      |                                                           |                                 | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 14,483,998                                | 3,978,011                        | 20,634,763                                           | 3,574,460                                                 | 24,233,741                      | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 32.136387                                 | 5.847565                         | 122.920356                                           | 0.048295                                                  | 0.124956                        | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            | 1,374,396                                 | 1,343,256                        | 663,195                                              | 1,724,037                                                 | 883,320                         | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                | 3.049443                                  | 1.974549                         | 3.950623                                             | 0.023294                                                  | 0.004555                        | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                           |                                  |                                                      |                                                           |                                 | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                           |                                  |                                                      |                                                           |                                 | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | MEDICAL<br>RECORDS &<br>LIBRARY<br>(TIME STUDY<br>M/R SPLIT) | MEDICAL<br>RECORDS &<br>LIBRARY<br>(INPATIENT<br>REVENUE) | OTHER GENERAL SERVICE                       |                                             |                                           |       |
|------------------------------|-------|--------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------|---------------------------------------------|-------------------------------------------|-------|
|                              |       |                                                              |                                                           | CLINICAL LAB<br>ADMIN MED<br>(FTES CLA MED) | CLINICAL LAB<br>ADMIN PED<br>(FTES CLA PED) | CLINICAL LAB<br>ADMIN OB<br>(FTES CLA OB) |       |
|                              |       | 16.00                                                        | 16.01                                                     | 18.00                                       | 18.01                                       | 18.02                                     |       |
| GENERAL SERVICE COST CENTERS |       |                                                              |                                                           |                                             |                                             |                                           |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT                                    |                                                           |                                             |                                             |                                           | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL                                    |                                                           |                                             |                                             |                                           | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG                                     |                                                           |                                             |                                             |                                           | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV                                     |                                                           |                                             |                                             |                                           | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH                                     |                                                           |                                             |                                             |                                           | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV                                      |                                                           |                                             |                                             |                                           | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH                                  |                                                           |                                             |                                             |                                           | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH                                  |                                                           |                                             |                                             |                                           | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                                         |                                                           |                                             |                                             |                                           | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY                               |                                                           |                                             |                                             |                                           | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III                                    |                                                           |                                             |                                             |                                           | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                                             |                                                           |                                             |                                             |                                           | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                                             |                                                           |                                             |                                             |                                           | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT                                       |                                                           |                                             |                                             |                                           | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS                                     |                                                           |                                             |                                             |                                           | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                                         |                                                           |                                             |                                             |                                           | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                                            |                                                           |                                             |                                             |                                           | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                                           |                                                           |                                             |                                             |                                           | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP                                    |                                                           |                                             |                                             |                                           | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                                             |                                                           |                                             |                                             |                                           | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                                         |                                                           |                                             |                                             |                                           | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                                           |                                                           |                                             |                                             |                                           | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH                                      |                                                           |                                             |                                             |                                           | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                                                 |                                                           |                                             |                                             |                                           | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                                        |                                                           |                                             |                                             |                                           | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                                               |                                                           |                                             |                                             |                                           | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH                                      |                                                           |                                             |                                             |                                           | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT                                 |                                                           |                                             |                                             |                                           | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT                                       |                                                           |                                             |                                             |                                           | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                                               |                                                           |                                             |                                             |                                           | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION                                      |                                                           |                                             |                                             |                                           | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE                                     |                                                           |                                             |                                             |                                           | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE                                    |                                                           |                                             |                                             |                                           | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB                                       |                                                           |                                             |                                             |                                           | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE                                       |                                                           |                                             |                                             |                                           | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                                         |                                                           |                                             |                                             |                                           | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                                             |                                                           |                                             |                                             |                                           | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                                                 |                                                           |                                             |                                             |                                           | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION                                     |                                                           |                                             |                                             |                                           | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                                        |                                                           |                                             |                                             |                                           | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                                           |                                                           |                                             |                                             |                                           | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE                                      |                                                           |                                             |                                             |                                           | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                                                 |                                                           |                                             |                                             |                                           | 9.00  |
| 10.00                        | 01000 | DIETARY                                                      |                                                           |                                             |                                             |                                           | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                                         |                                                           |                                             |                                             |                                           | 10.01 |
| 11.00                        | 01100 | CAFETERIA                                                    |                                                           |                                             |                                             |                                           | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION                                       |                                                           |                                             |                                             |                                           | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY                                    |                                                           |                                             |                                             |                                           | 14.00 |
| 15.00                        | 01500 | PHARMACY                                                     |                                                           |                                             |                                             |                                           | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY                                    | 10,000                                                    |                                             |                                             |                                           | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY                                    | 5,520                                                     | 2,137,996,474                               |                                             |                                           | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED                                       | 0                                                         | 0                                           | 29,688                                      |                                           | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED                                       | 0                                                         | 0                                           | 0                                           | 11,128                                    | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                                        | 0                                                         | 0                                           | 0                                           | 0                                         | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG                                      | 0                                                         | 0                                           | 0                                           | 0                                         | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH                                     | 0                                                         | 0                                           | 0                                           | 0                                         | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH                                      | 0                                                         | 0                                           | 0                                           | 0                                         | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD                                      | 0                                                         | 0                                           | 0                                           | 0                                         | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT                                     | 0                                                         | 0                                           | 0                                           | 0                                         | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR                                      | 0                                                         | 0                                           | 0                                           | 0                                         | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS                                      | 0                                                         | 0                                           | 0                                           | 0                                         | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS                                     | 0                                                         | 0                                           | 0                                           | 0                                         | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT                                  | 0                                                         | 0                                           | 0                                           | 0                                         | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                                         | 0                                                         | 0                                           | 0                                           | 0                                         | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS                                    | 0                                                         | 0                                           | 0                                           | 0                                         | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                                               | 0                                                         | 0                                           | 0                                           | 0                                         | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD                         | 0                                                         | 0                                           | 0                                           | 0                                         | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD                         | 0                                                         | 0                                           | 0                                           | 0                                         | 22.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

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From 07/01/2018  
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Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | MEDICAL<br>RECORDS &<br>LIBRARY<br>(TIME STUDY<br>M/R SPLIT) | MEDICAL<br>RECORDS &<br>LIBRARY<br>(INPATIENT<br>REVENUE) | OTHER GENERAL SERVICE                       |                                             |                                           |        |
|----------------------------------------|-------|----------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------|---------------------------------------------|-------------------------------------------|--------|
|                                        |       |                                        |                                                              |                                                           | CLINICAL LAB<br>ADMIN MED<br>(FTES CLA MED) | CLINICAL LAB<br>ADMIN PED<br>(FTES CLA PED) | CLINICAL LAB<br>ADMIN OB<br>(FTES CLA OB) |        |
|                                        |       |                                        | 16.00                                                        | 16.01                                                     | 18.00                                       | 18.01                                       | 18.02                                     |        |
| 23.00                                  | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT       | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.00  |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                              |                                                           |                                             |                                             |                                           |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                                            | 254,687,726                                               | 0                                           | 4,090                                       | 3,407                                     | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                                            | 78,386,521                                                | 0                                           | 0                                           | 0                                         | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                                                            | 79,550,791                                                | 0                                           | 0                                           | 0                                         | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                                            | 22,177,645                                                | 0                                           | 6,142                                       | 0                                         | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                                            | 62,624,888                                                | 0                                           | 9                                           | 12,888                                    | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                                            | 16,288,765                                                | 0                                           | 0                                           | 0                                         | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                                            | 21,358,190                                                | 0                                           | 0                                           | 0                                         | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                                            | 5,247,495                                                 | 0                                           | 0                                           | 2,060                                     | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                              |                                                           |                                             |                                             |                                           |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                                                            | 245,661,516                                               | 0                                           | 0                                           | 0                                         | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                                            | 19,276,134                                                | 0                                           | 0                                           | 0                                         | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                                            | 23,263,986                                                | 0                                           | 0                                           | 5,714                                     | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                                                            | 65,454,350                                                | 0                                           | 0                                           | 0                                         | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                                            | 164,632,224                                               | 0                                           | 0                                           | 0                                         | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                                            | 5,219,533                                                 | 0                                           | 0                                           | 0                                         | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                                            | 4,651,397                                                 | 0                                           | 0                                           | 0                                         | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                                                            | 225,309,885                                               | 4,523                                       | 887                                         | 505                                       | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                                            | 340,739                                                   | 0                                           | 0                                           | 0                                         | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                                            | 39,526,062                                                | 2,114                                       | 0                                           | 0                                         | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                                            | 39,266,905                                                | 0                                           | 0                                           | 0                                         | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                                            | 46,160,760                                                | 6,823                                       | 0                                           | 0                                         | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                                            | 19,791,436                                                | 2,681                                       | 0                                           | 0                                         | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                                            | 17,246,416                                                | 0                                           | 0                                           | 0                                         | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                                            | 7,795,292                                                 | 0                                           | 0                                           | 0                                         | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                                            | 58,932,565                                                | 0                                           | 0                                           | 0                                         | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                                            | 17,625,870                                                | 0                                           | 0                                           | 0                                         | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                                            | 81,820,757                                                | 0                                           | 0                                           | 0                                         | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                                            | 193,962,615                                               | 0                                           | 0                                           | 0                                         | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                                            | 239,291,260                                               | 0                                           | 0                                           | 0                                         | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                                            | 13,870,724                                                | 0                                           | 0                                           | 0                                         | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                                            | 503                                                       | 0                                           | 0                                           | 0                                         | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                              |                                                           |                                             |                                             |                                           |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                                                            | 1,176,349                                                 | 376                                         | 0                                           | 0                                         | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 4,480                                                        | 50,053,175                                                | 13,171                                      | 0                                           | 0                                         | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                              |                                                           |                                             |                                             |                                           |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                              |                                                           |                                             |                                             |                                           |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                                                            | 14,129,000                                                | 0                                           | 0                                           | 0                                         | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                                                            | 2,790,000                                                 | 0                                           | 0                                           | 0                                         | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                                            | 425,000                                                   | 0                                           | 0                                           | 0                                         | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 10,000                                                       | 2,137,996,474                                             | 29,688                                      | 11,128                                      | 24,574                                    | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                              |                                                           |                                             |                                             |                                           |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 190.02 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | MEDICAL<br>RECORDS &<br>LIBRARY<br>(TIME STUDY<br>M/R SPLIT) | MEDICAL<br>RECORDS &<br>LIBRARY<br>(INPATIENT<br>REVENUE) | OTHER GENERAL SERVICE                       |                                             |                                           |        |
|-------------------------|-------|--------------------------------------------------------|--------------------------------------------------------------|-----------------------------------------------------------|---------------------------------------------|---------------------------------------------|-------------------------------------------|--------|
|                         |       |                                                        |                                                              |                                                           | CLINICAL LAB<br>ADMIN MED<br>(FTES CLA MED) | CLINICAL LAB<br>ADMIN PED<br>(FTES CLA PED) | CLINICAL LAB<br>ADMIN OB<br>(FTES CLA OB) |        |
|                         |       |                                                        | 16.00                                                        | 16.01                                                     | 18.00                                       | 18.01                                       | 18.02                                     |        |
| 191.00                  | 19100 | RESEARCH                                               | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 191.00 |
| 191.01                  | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY                    | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 191.01 |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                                            | 0                                                         | 0                                           | 0                                           | 0                                         | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                              |                                                           |                                             |                                             |                                           | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                                              |                                                           |                                             |                                             |                                           | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 11,052,298                                                   | 25,357,152                                                | 560,210                                     | 189,333                                     | 2,577,482                                 | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 1,105.229800                                                 | 0.011860                                                  | 18.869914                                   | 17.014109                                   | 104.886547                                | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            | 409,611                                                      | 635,881                                                   | 1,560                                       | 14,783                                      | 266,560                                   | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                | 40.961100                                                    | 0.000297                                                  | 0.052546                                    | 1.328451                                    | 10.847237                                 | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                                              |                                                           |                                             |                                             |                                           | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                                              |                                                           |                                             |                                             |                                           | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

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Worksheet B-1

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11/24/2019 4:22 pm

| Cost Center Description      |       |                                      | OTHER GENERAL SERVICE                            |                                                    |                                                  |                                                  |                                                    |       |
|------------------------------|-------|--------------------------------------|--------------------------------------------------|----------------------------------------------------|--------------------------------------------------|--------------------------------------------------|----------------------------------------------------|-------|
|                              |       |                                      | CLINICAL LAB<br>ADMIN SURG<br>(FTES CLA<br>SURG) | CLINICAL LAB<br>ADMIN PSYCH<br>(FTES CLA<br>PSYCH) | CLINICAL LAB<br>ADMIN PATH<br>(FTES CLA<br>PATH) | CLINICAL LAB<br>ADMIN CARD<br>(FTES CLA<br>CARD) | CLINICAL LAB<br>ADMIN HEMAT<br>(FTES CLA<br>HEMAT) |       |
|                              |       |                                      | 18.03                                            | 18.04                                              | 18.05                                            | 18.06                                            | 18.07                                              |       |
| GENERAL SERVICE COST CENTERS |       |                                      |                                                  |                                                    |                                                  |                                                  |                                                    |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT            |                                                  |                                                    |                                                  |                                                  |                                                    | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL            |                                                  |                                                    |                                                  |                                                  |                                                    | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG             |                                                  |                                                    |                                                  |                                                  |                                                    | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV             |                                                  |                                                    |                                                  |                                                  |                                                    | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH             |                                                  |                                                    |                                                  |                                                  |                                                    | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV              |                                                  |                                                    |                                                  |                                                  |                                                    | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH          |                                                  |                                                    |                                                  |                                                  |                                                    | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH          |                                                  |                                                    |                                                  |                                                  |                                                    | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                 |                                                  |                                                    |                                                  |                                                  |                                                    | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY       |                                                  |                                                    |                                                  |                                                  |                                                    | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III            |                                                  |                                                    |                                                  |                                                  |                                                    | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                     |                                                  |                                                    |                                                  |                                                  |                                                    | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                     |                                                  |                                                    |                                                  |                                                  |                                                    | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT               |                                                  |                                                    |                                                  |                                                  |                                                    | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS             |                                                  |                                                    |                                                  |                                                  |                                                    | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                 |                                                  |                                                    |                                                  |                                                  |                                                    | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                    |                                                  |                                                    |                                                  |                                                  |                                                    | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                   |                                                  |                                                    |                                                  |                                                  |                                                    | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP            |                                                  |                                                    |                                                  |                                                  |                                                    | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                     |                                                  |                                                    |                                                  |                                                  |                                                    | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                 |                                                  |                                                    |                                                  |                                                  |                                                    | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                   |                                                  |                                                    |                                                  |                                                  |                                                    | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH              |                                                  |                                                    |                                                  |                                                  |                                                    | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                         |                                                  |                                                    |                                                  |                                                  |                                                    | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                |                                                  |                                                    |                                                  |                                                  |                                                    | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                       |                                                  |                                                    |                                                  |                                                  |                                                    | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH              |                                                  |                                                    |                                                  |                                                  |                                                    | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT         |                                                  |                                                    |                                                  |                                                  |                                                    | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT               |                                                  |                                                    |                                                  |                                                  |                                                    | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                       |                                                  |                                                    |                                                  |                                                  |                                                    | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION              |                                                  |                                                    |                                                  |                                                  |                                                    | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE             |                                                  |                                                    |                                                  |                                                  |                                                    | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE            |                                                  |                                                    |                                                  |                                                  |                                                    | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB               |                                                  |                                                    |                                                  |                                                  |                                                    | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE               |                                                  |                                                    |                                                  |                                                  |                                                    | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                 |                                                  |                                                    |                                                  |                                                  |                                                    | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                     |                                                  |                                                    |                                                  |                                                  |                                                    | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                         |                                                  |                                                    |                                                  |                                                  |                                                    | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION             |                                                  |                                                    |                                                  |                                                  |                                                    | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                |                                                  |                                                    |                                                  |                                                  |                                                    | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                   |                                                  |                                                    |                                                  |                                                  |                                                    | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE              |                                                  |                                                    |                                                  |                                                  |                                                    | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                         |                                                  |                                                    |                                                  |                                                  |                                                    | 9.00  |
| 10.00                        | 01000 | DIETARY                              |                                                  |                                                    |                                                  |                                                  |                                                    | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                 |                                                  |                                                    |                                                  |                                                  |                                                    | 10.01 |
| 11.00                        | 01100 | CAFETERIA                            |                                                  |                                                    |                                                  |                                                  |                                                    | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION               |                                                  |                                                    |                                                  |                                                  |                                                    | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY            |                                                  |                                                    |                                                  |                                                  |                                                    | 14.00 |
| 15.00                        | 01500 | PHARMACY                             |                                                  |                                                    |                                                  |                                                  |                                                    | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY            |                                                  |                                                    |                                                  |                                                  |                                                    | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY            |                                                  |                                                    |                                                  |                                                  |                                                    | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED               |                                                  |                                                    |                                                  |                                                  |                                                    | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED               |                                                  |                                                    |                                                  |                                                  |                                                    | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                |                                                  |                                                    |                                                  |                                                  |                                                    | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG              | 58,961                                           |                                                    |                                                  |                                                  |                                                    | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH             | 0                                                | 2,011                                              |                                                  |                                                  |                                                    | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH              | 0                                                | 0                                                  | 2,425                                            |                                                  |                                                    | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD              | 0                                                | 0                                                  | 0                                                | 6,679                                            |                                                    | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT             | 0                                                | 0                                                  | 0                                                | 0                                                | 5,101                                              | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR              | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS              | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS             | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT          | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                 | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS            | 1,873                                            | 0                                                  | 0                                                | 0                                                | 0                                                  | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                       | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT     | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.00 |

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| Cost Center Description                |       |                                        | OTHER GENERAL SERVICE                            |                                                    |                                                  |                                                  |                                                    |        |
|----------------------------------------|-------|----------------------------------------|--------------------------------------------------|----------------------------------------------------|--------------------------------------------------|--------------------------------------------------|----------------------------------------------------|--------|
|                                        |       |                                        | CLINICAL LAB<br>ADMIN SURG<br>(FTES CLA<br>SURG) | CLINICAL LAB<br>ADMIN PSYCH<br>(FTES CLA<br>PSYCH) | CLINICAL LAB<br>ADMIN PATH<br>(FTES CLA<br>PATH) | CLINICAL LAB<br>ADMIN CARD<br>(FTES CLA<br>CARD) | CLINICAL LAB<br>ADMIN HEMAT<br>(FTES CLA<br>HEMAT) |        |
|                                        |       |                                        | 18.03                                            | 18.04                                              | 18.05                                            | 18.06                                            | 18.07                                              |        |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                  |                                                    |                                                  |                                                  |                                                    |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 41.00  |
| 43.00                                  | 04300 | NURSEY                                 | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                  |                                                    |                                                  |                                                  |                                                    |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 21,855                                           | 0                                                  | 0                                                | 0                                                | 0                                                  | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 5,718                                            | 0                                                  | 0                                                | 0                                                | 0                                                  | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 1,784                                            | 0                                                  | 0                                                | 0                                                | 0                                                  | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 16,938                                           | 0                                                  | 0                                                | 0                                                | 0                                                  | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 3,484                                            | 0                                                  | 0                                                | 0                                                | 0                                                  | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 767                                              | 0                                                  | 0                                                | 0                                                | 0                                                  | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 1,906                                            | 0                                                  | 2,425                                            | 1,989                                            | 1,881                                              | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                                | 0                                                  | 0                                                | 0                                                | 592                                                | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                                | 0                                                  | 0                                                | 0                                                | 2,628                                              | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                                | 300                                                | 0                                                | 0                                                | 0                                                  | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 2,204                                            | 0                                                  | 0                                                | 0                                                | 0                                                  | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                                | 0                                                  | 0                                                | 4,690                                            | 0                                                  | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                                | 31                                                 | 0                                                | 0                                                | 0                                                  | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                  |                                                    |                                                  |                                                  |                                                    |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                                                | 1,680                                              | 0                                                | 0                                                | 0                                                  | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                  |                                                    |                                                  |                                                  |                                                    |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                  |                                                    |                                                  |                                                  |                                                    |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 1,708                                            | 0                                                  | 0                                                | 0                                                | 0                                                  | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 679                                              | 0                                                  | 0                                                | 0                                                | 0                                                  | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 45                                               | 0                                                  | 0                                                | 0                                                | 0                                                  | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 58,961                                           | 2,011                                              | 2,425                                            | 6,679                                            | 5,101                                              | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                  |                                                    |                                                  |                                                  |                                                    |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 191.01 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | OTHER GENERAL SERVICE                            |                                                    |                                                  |                                                  |                                                    |        |
|-------------------------|-------|--------------------------------------------------------|--------------------------------------------------|----------------------------------------------------|--------------------------------------------------|--------------------------------------------------|----------------------------------------------------|--------|
|                         |       |                                                        | CLINICAL LAB<br>ADMIN SURG<br>(FTES CLA<br>SURG) | CLINICAL LAB<br>ADMIN PSYCH<br>(FTES CLA<br>PSYCH) | CLINICAL LAB<br>ADMIN PATH<br>(FTES CLA<br>PATH) | CLINICAL LAB<br>ADMIN CARD<br>(FTES CLA<br>CARD) | CLINICAL LAB<br>ADMIN HEMAT<br>(FTES CLA<br>HEMAT) |        |
|                         |       |                                                        | 18.03                                            | 18.04                                              | 18.05                                            | 18.06                                            | 18.07                                              |        |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                                | 0                                                  | 0                                                | 0                                                | 0                                                  | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                  |                                                    |                                                  |                                                  |                                                    | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                                  |                                                    |                                                  |                                                  |                                                    | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 3,435,642                                        | 125,688                                            | 2,101,043                                        | 1,779,202                                        | 0                                                  | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 58.269738                                        | 62.500249                                          | 866.409485                                       | 266.387483                                       | 0.000000                                           | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            | 215,450                                          | 78,068                                             | 625,434                                          | 3,119                                            | 0                                                  | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                | 3.654110                                         | 33.173048                                          | 257.910928                                       | 0.466986                                         | 0.000000                                           | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                                  |                                                    |                                                  |                                                  |                                                    | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                                  |                                                    |                                                  |                                                  |                                                    | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |                              |                                      | OTHER GENERAL SERVICE                            |                                                  |                                                    |                                                          |                                                |       |
|-------------------------|------------------------------|--------------------------------------|--------------------------------------------------|--------------------------------------------------|----------------------------------------------------|----------------------------------------------------------|------------------------------------------------|-------|
|                         |                              |                                      | CLINICAL LAB<br>ADMIN NEUR<br>(FTES CLA<br>NEUR) | CLINICAL LAB<br>ADMIN OCLS<br>(FTES CLA<br>OCLS) | DISCRETIONARY<br>OPERATIONS<br>(FTES ON<br>CAMPUS) | RUSH<br>UNIVERSITY<br>ADMIN SPLIT<br>(TIME STUDY<br>RUA) | NURSING SCHOOL<br>SPLIT<br>(TIME STUDY<br>RNC) |       |
|                         |                              |                                      | 18.08                                            | 18.09                                            | 18.12                                              | 18.14                                                    | 18.16                                          |       |
|                         | GENERAL SERVICE COST CENTERS |                                      |                                                  |                                                  |                                                    |                                                          |                                                |       |
| 1.00                    | 00100                        | CAP REL COSTS-BLDG & FIXT            |                                                  |                                                  |                                                    |                                                          |                                                | 1.00  |
| 1.01                    | 00101                        | DEPRECIATION OLD HOSPITAL            |                                                  |                                                  |                                                    |                                                          |                                                | 1.01  |
| 1.02                    | 00102                        | DEPRECIATION DIRECT BLDG             |                                                  |                                                  |                                                    |                                                          |                                                | 1.02  |
| 1.03                    | 00103                        | DEPRECIATION KELLOGG PAV             |                                                  |                                                  |                                                    |                                                          |                                                | 1.03  |
| 1.04                    | 00104                        | DEPRECIATION JELKE SOUTH             |                                                  |                                                  |                                                    |                                                          |                                                | 1.04  |
| 1.05                    | 00105                        | DEPRECIATION ATRIUM PAV              |                                                  |                                                  |                                                    |                                                          |                                                | 1.05  |
| 1.06                    | 00106                        | DEPRECIATION PRO BLDG NORTH          |                                                  |                                                  |                                                    |                                                          |                                                | 1.06  |
| 1.07                    | 00107                        | DEPRECIATION PRO BLDG SOUTH          |                                                  |                                                  |                                                    |                                                          |                                                | 1.07  |
| 1.08                    | 00108                        | DEPRECIATION WOOD ST                 |                                                  |                                                  |                                                    |                                                          |                                                | 1.08  |
| 1.09                    | 00109                        | DEPRECIATION ACADEMIC FACILITY       |                                                  |                                                  |                                                    |                                                          |                                                | 1.09  |
| 1.10                    | 00110                        | DEPRECIATION PRO BLDG III            |                                                  |                                                  |                                                    |                                                          |                                                | 1.10  |
| 1.11                    | 00111                        | DEPRECIATION JRB                     |                                                  |                                                  |                                                    |                                                          |                                                | 1.11  |
| 1.12                    | 00112                        | DEPRECIATION TOB                     |                                                  |                                                  |                                                    |                                                          |                                                | 1.12  |
| 1.13                    | 00113                        | DEPRECIATION EQUIPMENT               |                                                  |                                                  |                                                    |                                                          |                                                | 1.13  |
| 1.14                    | 00114                        | DEPRECIATION ORTHOPEDICS             |                                                  |                                                  |                                                    |                                                          |                                                | 1.14  |
| 1.15                    | 00115                        | DEPRECIATION KIDSTON                 |                                                  |                                                  |                                                    |                                                          |                                                | 1.15  |
| 1.16                    | 00116                        | DEPRECIATION COHN                    |                                                  |                                                  |                                                    |                                                          |                                                | 1.16  |
| 1.17                    | 00117                        | DEPRECIATION TOWER                   |                                                  |                                                  |                                                    |                                                          |                                                | 1.17  |
| 2.00                    | 00200                        | CAP REL COSTS-MVBLE EQUIP            |                                                  |                                                  |                                                    |                                                          |                                                | 2.00  |
| 2.01                    | 00201                        | INTEREST GENERAL                     |                                                  |                                                  |                                                    |                                                          |                                                | 2.01  |
| 2.02                    | 00202                        | INTEREST DIRECT BLDG                 |                                                  |                                                  |                                                    |                                                          |                                                | 2.02  |
| 2.03                    | 00203                        | INTEREST ATRUM PAV                   |                                                  |                                                  |                                                    |                                                          |                                                | 2.03  |
| 2.04                    | 00204                        | INTEREST PRO BLDG SOUTH              |                                                  |                                                  |                                                    |                                                          |                                                | 2.04  |
| 2.05                    | 00205                        | INTEREST TOB                         |                                                  |                                                  |                                                    |                                                          |                                                | 2.05  |
| 2.06                    | 00206                        | INTEREST PRO BLDG III                |                                                  |                                                  |                                                    |                                                          |                                                | 2.06  |
| 2.07                    | 00207                        | INTEREST TOWER                       |                                                  |                                                  |                                                    |                                                          |                                                | 2.07  |
| 2.08                    | 00208                        | INTEREST PRO BLDG NORTH              |                                                  |                                                  |                                                    |                                                          |                                                | 2.08  |
| 4.00                    | 00400                        | EMPLOYEE BENEFITS DEPARTMENT         |                                                  |                                                  |                                                    |                                                          |                                                | 4.00  |
| 5.01                    | 00590                        | TRANSITION RECRUITMENT               |                                                  |                                                  |                                                    |                                                          |                                                | 5.01  |
| 5.02                    | 00540                        | PARKING GARAGE                       |                                                  |                                                  |                                                    |                                                          |                                                | 5.02  |
| 5.03                    | 00591                        | RESEARCH ADMINISTRATION              |                                                  |                                                  |                                                    |                                                          |                                                | 5.03  |
| 5.04                    | 00592                        | ADMIN & GEN INPT SERVICE             |                                                  |                                                  |                                                    |                                                          |                                                | 5.04  |
| 5.05                    | 00593                        | ADMIN & GEN OUTPT SERVICE            |                                                  |                                                  |                                                    |                                                          |                                                | 5.05  |
| 5.06                    | 00594                        | ADMIN & GEN ANIMAL LAB               |                                                  |                                                  |                                                    |                                                          |                                                | 5.06  |
| 5.07                    | 00595                        | ADMIN & GEN PT SERVICE               |                                                  |                                                  |                                                    |                                                          |                                                | 5.07  |
| 5.08                    | 00596                        | PERSONNEL DEPARTMENT                 |                                                  |                                                  |                                                    |                                                          |                                                | 5.08  |
| 5.09                    | 00597                        | RESEARCH FACULTY                     |                                                  |                                                  |                                                    |                                                          |                                                | 5.09  |
| 5.10                    | 00598                        | RESEARCH SPA                         |                                                  |                                                  |                                                    |                                                          |                                                | 5.10  |
| 5.11                    | 00560                        | CORPORATE ADMINISTRATION             |                                                  |                                                  |                                                    |                                                          |                                                | 5.11  |
| 6.00                    | 00600                        | MAINTENANCE & REPAIRS                |                                                  |                                                  |                                                    |                                                          |                                                | 6.00  |
| 6.01                    | 00601                        | RENTED SPACE COSTS                   |                                                  |                                                  |                                                    |                                                          |                                                | 6.01  |
| 8.00                    | 00800                        | LAUNDRY & LINEN SERVICE              |                                                  |                                                  |                                                    |                                                          |                                                | 8.00  |
| 9.00                    | 00900                        | HOUSEKEEPING                         |                                                  |                                                  |                                                    |                                                          |                                                | 9.00  |
| 10.00                   | 01000                        | DIETARY                              |                                                  |                                                  |                                                    |                                                          |                                                | 10.00 |
| 10.01                   | 01001                        | PATIENT FOOD SERVICE                 |                                                  |                                                  |                                                    |                                                          |                                                | 10.01 |
| 11.00                   | 01100                        | CAFETERIA                            |                                                  |                                                  |                                                    |                                                          |                                                | 11.00 |
| 13.00                   | 01300                        | NURSING ADMINISTRATION               |                                                  |                                                  |                                                    |                                                          |                                                | 13.00 |
| 14.00                   | 01400                        | CENTRAL SERVICES & SUPPLY            |                                                  |                                                  |                                                    |                                                          |                                                | 14.00 |
| 15.00                   | 01500                        | PHARMACY                             |                                                  |                                                  |                                                    |                                                          |                                                | 15.00 |
| 16.00                   | 01600                        | MEDICAL RECORDS & LIBRARY            |                                                  |                                                  |                                                    |                                                          |                                                | 16.00 |
| 16.01                   | 01601                        | MEDICAL RECORDS & LIBRARY            |                                                  |                                                  |                                                    |                                                          |                                                | 16.01 |
| 18.00                   | 01850                        | CLINICAL LAB ADMIN MED               |                                                  |                                                  |                                                    |                                                          |                                                | 18.00 |
| 18.01                   | 01800                        | CLINICAL LAB ADMIN PED               |                                                  |                                                  |                                                    |                                                          |                                                | 18.01 |
| 18.02                   | 01851                        | CLINICAL LAB ADMIN OB                |                                                  |                                                  |                                                    |                                                          |                                                | 18.02 |
| 18.03                   | 01852                        | CLINICAL LAB ADMIN SURG              |                                                  |                                                  |                                                    |                                                          |                                                | 18.03 |
| 18.04                   | 01853                        | CLINICAL LAB ADMIN PSYCH             |                                                  |                                                  |                                                    |                                                          |                                                | 18.04 |
| 18.05                   | 01854                        | CLINICAL LAB ADMIN PATH              |                                                  |                                                  |                                                    |                                                          |                                                | 18.05 |
| 18.06                   | 01855                        | CLINICAL LAB ADMIN CARD              |                                                  |                                                  |                                                    |                                                          |                                                | 18.06 |
| 18.07                   | 01856                        | CLINICAL LAB ADMIN HEMAT             |                                                  |                                                  |                                                    |                                                          |                                                | 18.07 |
| 18.08                   | 01857                        | CLINICAL LAB ADMIN NEUR              | 9,797                                            |                                                  |                                                    |                                                          |                                                | 18.08 |
| 18.09                   | 01858                        | CLINICAL LAB ADMIN OCLS              | 0                                                | 20,269                                           |                                                    |                                                          |                                                | 18.09 |
| 18.12                   | 01859                        | DISCRETIONARY OPERATIONS             | 0                                                | 0                                                | 627,761                                            |                                                          |                                                | 18.12 |
| 18.14                   | 01860                        | RUSH UNIVERSITY ADMIN SPLIT          | 0                                                | 0                                                | 10,851                                             | 66,922                                                   |                                                | 18.14 |
| 18.16                   | 01861                        | NURSING SCHOOL SPLIT                 | 0                                                | 0                                                | 13,409                                             | 27,018                                                   | 10,000                                         | 18.16 |
| 19.00                   | 01900                        | NONPHYSICIAN ANESTHETISTS            | 0                                                | 0                                                | 1,873                                              | 0                                                        | 0                                              | 19.00 |
| 20.00                   | 02000                        | NURSING SCHOOL                       | 0                                                | 0                                                | 0                                                  | 0                                                        | 8,986                                          | 20.00 |
| 21.00                   | 02100                        | I&R SERVICES-SALARY & FRINGES APPRVD | 0                                                | 0                                                | 74,141                                             | 0                                                        | 0                                              | 21.00 |
| 22.00                   | 02200                        | I&R SERVICES-OTHER PRGM COSTS APPRVD | 0                                                | 0                                                | 4,421                                              | 0                                                        | 0                                              | 22.00 |

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| Cost Center Description                |       |                                        | OTHER GENERAL SERVICE                            |                                                  |                                                    |                                                          |                                                |        |
|----------------------------------------|-------|----------------------------------------|--------------------------------------------------|--------------------------------------------------|----------------------------------------------------|----------------------------------------------------------|------------------------------------------------|--------|
|                                        |       |                                        | CLINICAL LAB<br>ADMIN NEUR<br>(FTES CLA<br>NEUR) | CLINICAL LAB<br>ADMIN OCLS<br>(FTES CLA<br>OCLS) | DISCRETIONARY<br>OPERATIONS<br>(FTES ON<br>CAMPUS) | RUSH<br>UNIVERSITY<br>ADMIN SPLIT<br>(TIME STUDY<br>RUA) | NURSING SCHOOL<br>SPLIT<br>(TIME STUDY<br>RNC) |        |
|                                        |       |                                        | 18.08                                            | 18.09                                            | 18.12                                              | 18.14                                                    | 18.16                                          |        |
| 23.00                                  | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT       | 0                                                | 0                                                | 2,254                                              | 1,579                                                    | 0                                              | 23.00  |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 0                                                | 0                                                | 367                                                | 1,431                                                    | 0                                              | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        | 0                                                | 0                                                | 318                                                | 1,126                                                    | 0                                              | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         | 0                                                | 0                                                | 1,100                                              | 3,902                                                    | 0                                              | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           | 0                                                | 0                                                | 986                                                | 2,895                                                    | 0                                              | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                | 0                                                | 0                                                | 347                                                | 0                                                        | 0                                              | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  | 0                                                | 0                                                | 941                                                | 0                                                        | 0                                              | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     | 0                                                | 0                                                | 561                                                | 2,411                                                    | 0                                              | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            | 0                                                | 0                                                | 196                                                | 878                                                      | 0                                              | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       | 0                                                | 0                                                | 1,040                                              | 0                                                        | 0                                              | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            | 0                                                | 0                                                | 397                                                | 966                                                      | 0                                              | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 0                                                | 0                                                | 722                                                | 3,804                                                    | 0                                              | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                  |                                                  |                                                    |                                                          |                                                |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                                | 0                                                | 71,934                                             | 0                                                        | 0                                              | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                                | 0                                                | 18,267                                             | 0                                                        | 0                                              | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                                                | 0                                                | 18,687                                             | 0                                                        | 0                                              | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                                | 0                                                | 6,157                                              | 0                                                        | 0                                              | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                                | 0                                                | 12,896                                             | 0                                                        | 0                                              | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                                | 0                                                | 6,165                                              | 0                                                        | 0                                              | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                                | 0                                                | 5,350                                              | 0                                                        | 0                                              | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                                | 0                                                | 2,060                                              | 0                                                        | 0                                              | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                  |                                                  |                                                    |                                                          |                                                |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 995                                              | 0                                                | 21,855                                             | 0                                                        | 0                                              | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                                | 0                                                | 5,718                                              | 0                                                        | 0                                              | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                                | 0                                                | 5,714                                              | 0                                                        | 0                                              | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                                                | 0                                                | 1,784                                              | 0                                                        | 0                                              | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                                | 0                                                | 16,938                                             | 0                                                        | 0                                              | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                                | 0                                                | 3,484                                              | 0                                                        | 0                                              | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                                | 0                                                | 767                                                | 0                                                        | 0                                              | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                                                | 17,493                                           | 32,433                                             | 0                                                        | 0                                              | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                                | 592                                              | 592                                                | 0                                                        | 0                                              | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                                | 2,184                                            | 2,628                                              | 0                                                        | 0                                              | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                                | 0                                                | 6,998                                              | 0                                                        | 0                                              | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                                | 0                                                | 5,277                                              | 0                                                        | 0                                              | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                                | 0                                                | 3,885                                              | 0                                                        | 0                                              | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                                | 0                                                | 2,531                                              | 0                                                        | 0                                              | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                                | 0                                                | 5,964                                              | 0                                                        | 0                                              | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 1,631                                            | 0                                                | 1,953                                              | 0                                                        | 0                                              | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                                | 0                                                | 3,810                                              | 0                                                        | 0                                              | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                  |                                                  |                                                    |                                                          |                                                |        |
| 90.00                                  | 09000 | CLINIC                                 | 7,171                                            | 0                                                | 39,654                                             | 0                                                        | 0                                              | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                                | 0                                                | 13,484                                             | 0                                                        | 0                                              | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                  |                                                  |                                                    |                                                          |                                                |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                  |                                                  |                                                    |                                                          |                                                |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                                                | 0                                                | 1,708                                              | 0                                                        | 0                                              | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                                                | 0                                                | 679                                                | 0                                                        | 0                                              | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                                | 0                                                | 45                                                 | 0                                                        | 0                                              | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                                | 0                                                | 0                                                  | 0                                                        | 0                                              | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 9,797                                            | 20,269                                           | 433,341                                            | 46,010                                                   | 8,986                                          | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                  |                                                  |                                                    |                                                          |                                                |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                                | 0                                                | 1,140                                              | 3,677                                                    | 1,014                                          | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                                | 0                                                | 6,692                                              | 0                                                        | 0                                              | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                                | 0                                                | 2,050                                              | 0                                                        | 0                                              | 190.02 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | OTHER GENERAL SERVICE                            |                                                  |                                                    |                                                          |                                                |        |
|-------------------------|-------|--------------------------------------------------------|--------------------------------------------------|--------------------------------------------------|----------------------------------------------------|----------------------------------------------------------|------------------------------------------------|--------|
|                         |       |                                                        | CLINICAL LAB<br>ADMIN NEUR<br>(FTES CLA<br>NEUR) | CLINICAL LAB<br>ADMIN OCLS<br>(FTES CLA<br>OCLS) | DISCRETIONARY<br>OPERATIONS<br>(FTES ON<br>CAMPUS) | RUSH<br>UNIVERSITY<br>ADMIN SPLIT<br>(TIME STUDY<br>RUA) | NURSING SCHOOL<br>SPLIT<br>(TIME STUDY<br>RNC) |        |
|                         |       |                                                        | 18.08                                            | 18.09                                            | 18.12                                              | 18.14                                                    | 18.16                                          |        |
| 191.00                  | 19100 | RESEARCH                                               | 0                                                | 0                                                | 28,453                                             | 0                                                        | 0                                              | 191.00 |
| 191.01                  | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY                    | 0                                                | 0                                                | 27,949                                             | 0                                                        | 0                                              | 191.01 |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 0                                                | 0                                                | 1,920                                              | 0                                                        | 0                                              | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 0                                                | 0                                                | 100,740                                            | 0                                                        | 0                                              | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                                                | 0                                                | 11,129                                             | 17,235                                                   | 0                                              | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                                                | 0                                                | 5,045                                              | 0                                                        | 0                                              | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                                | 0                                                | 2,428                                              | 0                                                        | 0                                              | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                                | 0                                                | 6,709                                              | 0                                                        | 0                                              | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                                | 0                                                | 165                                                | 0                                                        | 0                                              | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                  |                                                  |                                                    |                                                          |                                                | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                                  |                                                  |                                                    |                                                          |                                                | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 2,030,853                                        | 2,968,345                                        | -362,862                                           | 25,080,181                                               | 33,666,354                                     | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 207.293355                                       | 146.447531                                       | 0.000000                                           | 374.767356                                               | 3,366.635400                                   | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            | 23,737                                           | 55,638                                           | 169,083                                            | 3,335,464                                                | 1,941,521                                      | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                | 2.422885                                         | 2.744980                                         | 0.269343                                           | 49.841069                                                | 194.152100                                     | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                                  |                                                  |                                                    |                                                          |                                                | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                                  |                                                  |                                                    |                                                          |                                                | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | NONPHYSICIAN<br>ANESTHETISTS<br>(PERCENT CRNA) | NURSING SCHOOL<br>(HOURS RNC) | INTERNS & RESIDENTS                       |                                          | PARAMED HEALTH<br>SYSTEM<br>MANAGEMENT<br>(DIRECT COST<br>REVENUE<br>CENTERS) |       |
|------------------------------|-------|------------------------------------------------|-------------------------------|-------------------------------------------|------------------------------------------|-------------------------------------------------------------------------------|-------|
|                              |       |                                                |                               | SERVICES-SALAR<br>Y & FRINGES<br>(HOURS ) | SERVICES-OTHER<br>PRGM COSTS<br>(HOURS ) |                                                                               |       |
|                              |       | 19.00                                          | 20.00                         | 21.00                                     | 22.00                                    | 23.00                                                                         |       |
| GENERAL SERVICE COST CENTERS |       |                                                |                               |                                           |                                          |                                                                               |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT                      |                               |                                           |                                          |                                                                               | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL                      |                               |                                           |                                          |                                                                               | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG                       |                               |                                           |                                          |                                                                               | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV                       |                               |                                           |                                          |                                                                               | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH                       |                               |                                           |                                          |                                                                               | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV                        |                               |                                           |                                          |                                                                               | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH                    |                               |                                           |                                          |                                                                               | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH                    |                               |                                           |                                          |                                                                               | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                           |                               |                                           |                                          |                                                                               | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY                 |                               |                                           |                                          |                                                                               | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III                      |                               |                                           |                                          |                                                                               | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                               |                               |                                           |                                          |                                                                               | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                               |                               |                                           |                                          |                                                                               | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT                         |                               |                                           |                                          |                                                                               | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS                       |                               |                                           |                                          |                                                                               | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                           |                               |                                           |                                          |                                                                               | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                              |                               |                                           |                                          |                                                                               | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                             |                               |                                           |                                          |                                                                               | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP                      |                               |                                           |                                          |                                                                               | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                               |                               |                                           |                                          |                                                                               | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                           |                               |                                           |                                          |                                                                               | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                             |                               |                                           |                                          |                                                                               | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH                        |                               |                                           |                                          |                                                                               | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                                   |                               |                                           |                                          |                                                                               | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                          |                               |                                           |                                          |                                                                               | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                                 |                               |                                           |                                          |                                                                               | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH                        |                               |                                           |                                          |                                                                               | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT                   |                               |                                           |                                          |                                                                               | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT                         |                               |                                           |                                          |                                                                               | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                                 |                               |                                           |                                          |                                                                               | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION                        |                               |                                           |                                          |                                                                               | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE                       |                               |                                           |                                          |                                                                               | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE                      |                               |                                           |                                          |                                                                               | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB                         |                               |                                           |                                          |                                                                               | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE                         |                               |                                           |                                          |                                                                               | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                           |                               |                                           |                                          |                                                                               | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                               |                               |                                           |                                          |                                                                               | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                                   |                               |                                           |                                          |                                                                               | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION                       |                               |                                           |                                          |                                                                               | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                          |                               |                                           |                                          |                                                                               | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                             |                               |                                           |                                          |                                                                               | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE                        |                               |                                           |                                          |                                                                               | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                                   |                               |                                           |                                          |                                                                               | 9.00  |
| 10.00                        | 01000 | DIETARY                                        |                               |                                           |                                          |                                                                               | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                           |                               |                                           |                                          |                                                                               | 10.01 |
| 11.00                        | 01100 | CAFETERIA                                      |                               |                                           |                                          |                                                                               | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION                         |                               |                                           |                                          |                                                                               | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY                      |                               |                                           |                                          |                                                                               | 14.00 |
| 15.00                        | 01500 | PHARMACY                                       |                               |                                           |                                          |                                                                               | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY                      |                               |                                           |                                          |                                                                               | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY                      |                               |                                           |                                          |                                                                               | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED                         |                               |                                           |                                          |                                                                               | 18.00 |
| 18.01                        | 01800 | CLINICAL LAB ADMIN PED                         |                               |                                           |                                          |                                                                               | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                          |                               |                                           |                                          |                                                                               | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG                        |                               |                                           |                                          |                                                                               | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH                       |                               |                                           |                                          |                                                                               | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH                        |                               |                                           |                                          |                                                                               | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD                        |                               |                                           |                                          |                                                                               | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT                       |                               |                                           |                                          |                                                                               | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR                        |                               |                                           |                                          |                                                                               | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS                        |                               |                                           |                                          |                                                                               | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS                       |                               |                                           |                                          |                                                                               | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT                    |                               |                                           |                                          |                                                                               | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                           |                               |                                           |                                          |                                                                               | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS                      | 10,000                        |                                           |                                          |                                                                               | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                                 |                               | 24,050                                    |                                          |                                                                               | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD           |                               |                                           | 45,883                                   |                                                                               | 21.00 |

## COST ALLOCATION - STATISTICAL BASIS

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11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | NONPHYSICIAN<br>ANESTHETISTS<br>(PERCENT CRNA) | NURSING SCHOOL<br>(HOURS RNC) | INTERNS & RESIDENTS                       |                                          | PARAMED HEALTH<br>SYSTEM<br>MANAGEMENT<br>(DIRECT COST<br>REVENUE<br>CENTERS) |        |
|----------------------------------------|-------|----------------------------------------|------------------------------------------------|-------------------------------|-------------------------------------------|------------------------------------------|-------------------------------------------------------------------------------|--------|
|                                        |       |                                        |                                                |                               | SERVICES-SALAR<br>Y & FRINGES<br>(HOURS ) | SERVICES-OTHER<br>PRGM COSTS<br>(HOURS ) |                                                                               |        |
| 22.00                                  | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD   | 19.00                                          | 20.00                         | 21.00                                     | 22.00                                    | 23.00                                                                         |        |
| 23.00                                  | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT       |                                                |                               |                                           | 45,883                                   | 647,774,678                                                                   | 22.00  |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         |                                                |                               |                                           |                                          |                                                                               | 23.00  |
| 23.02                                  | 02302 | PARAMED DIETARY                        |                                                |                               |                                           |                                          |                                                                               | 23.01  |
| 23.03                                  | 02303 | PARAMED SPEECH                         |                                                |                               |                                           |                                          |                                                                               | 23.02  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           |                                                |                               |                                           |                                          |                                                                               | 23.03  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                |                                                |                               |                                           |                                          |                                                                               | 23.04  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  |                                                |                               |                                           |                                          |                                                                               | 23.05  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     |                                                |                               |                                           |                                          |                                                                               | 23.06  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            |                                                |                               |                                           |                                          |                                                                               | 23.07  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       |                                                |                               |                                           |                                          |                                                                               | 23.08  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            |                                                |                               |                                           |                                          |                                                                               | 23.09  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           |                                                |                               |                                           |                                          |                                                                               | 23.10  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                |                               |                                           |                                          |                                                                               |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                              | 18,236                        | 8,590                                     | 8,590                                    | 100,331,454                                                                   | 23.11  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                              | 45                            | 1,256                                     | 1,256                                    | 23,771,716                                                                    | 30.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                                              | 0                             | 2,726                                     | 2,726                                    | 27,065,781                                                                    | 34.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                              | 0                             | 435                                       | 435                                      | 7,946,371                                                                     | 35.00  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                              | 1,023                         | 539                                       | 539                                      | 17,526,766                                                                    | 35.01  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                              | 1,894                         | 702                                       | 702                                      | 7,855,638                                                                     | 35.02  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                              | 932                           | 338                                       | 338                                      | 7,351,349                                                                     | 40.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                              | 0                             | 100                                       | 100                                      | 0                                                                             | 41.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                |                               |                                           |                                          |                                                                               |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                                              | 0                             | 3,472                                     | 3,472                                    | 122,293,187                                                                   | 43.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                              | 0                             | 0                                         | 0                                        | 8,696,641                                                                     | 50.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                              | 0                             | 460                                       | 460                                      | 8,729,123                                                                     | 51.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 10,000                                         | 1,920                         | 3,216                                     | 3,216                                    | 10,662,708                                                                    | 52.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                              | 0                             | 4,184                                     | 4,184                                    | 37,199,191                                                                    | 53.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                              | 0                             | 615                                       | 615                                      | 11,433,118                                                                    | 54.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                              | 0                             | 466                                       | 466                                      | 4,218,202                                                                     | 55.00  |
| 60.00                                  | 06000 | LABORATORY                             | 0                                              | 0                             | 1,633                                     | 1,633                                    | 68,123,692                                                                    | 56.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                              | 0                             | 0                                         | 0                                        | 1,852,804                                                                     | 60.00  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 60.01  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                              | 0                             | 153                                       | 153                                      | 11,403,766                                                                    | 61.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                              | 0                             | 0                                         | 0                                        | 1,577                                                                         | 62.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                              | 0                             | 377                                       | 377                                      | 11,118,827                                                                    | 64.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                              | 0                             | 0                                         | 0                                        | 6,480,418                                                                     | 65.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                              | 0                             | 0                                         | 0                                        | 5,049,908                                                                     | 66.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                              | 0                             | 0                                         | 0                                        | 3,722,121                                                                     | 67.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                              | 0                             | 631                                       | 631                                      | 26,087,502                                                                    | 68.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                              | 0                             | 0                                         | 0                                        | 1,830,395                                                                     | 69.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 70.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 71.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 72.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 73.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                              | 0                             | 710                                       | 710                                      | 3,350,004                                                                     | 74.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                              | 0                             | 1,468                                     | 1,468                                    | 4,144,400                                                                     | 76.00  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                |                               |                                           |                                          |                                                                               |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                                              | 0                             | 5,789                                     | 5,789                                    | 81,698,533                                                                    | 76.01  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                              | 0                             | 2,729                                     | 2,729                                    | 18,763,791                                                                    | 90.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 91.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 92.00  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 92.01  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                |                               |                                           |                                          |                                                                               |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 93.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 94.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 98.00  |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                |                               |                                           |                                          |                                                                               |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                                              | 0                             | 101                                       | 101                                      | 6,507,586                                                                     | 100.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 105.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                                              | 0                             | 0                                         | 0                                        | 2,247,215                                                                     | 106.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 107.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                              | 0                             | 0                                         | 0                                        | 310,894                                                                       | 108.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 109.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 112.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 10,000                                         | 24,050                        | 40,690                                    | 40,690                                   | 647,774,678                                                                   | 114.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                |                               |                                           |                                          |                                                                               |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEN     | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 118.00 |
|                                        |       |                                        |                                                |                               |                                           |                                          |                                                                               | 190.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | NONPHYSICIAN<br>ANESTHETISTS<br>(PERCENT CRNA) | NURSING SCHOOL<br>(HOURS RNC) | INTERNS & RESIDENTS                       |                                          | PARAMED HEALTH<br>SYSTEM<br>MANAGEMENT<br>(DIRECT COST<br>REVENUE<br>CENTERS) |          |
|-------------------------|-------|--------------------------------------------------------|------------------------------------------------|-------------------------------|-------------------------------------------|------------------------------------------|-------------------------------------------------------------------------------|----------|
|                         |       |                                                        |                                                |                               | SERVICES-SALAR<br>Y & FRINGES<br>(HOURS ) | SERVICES-OTHER<br>PRGM COSTS<br>(HOURS ) |                                                                               |          |
|                         |       |                                                        |                                                |                               | 21.00                                     | 22.00                                    |                                                                               |          |
|                         |       |                                                        | 19.00                                          | 20.00                         |                                           |                                          | 23.00                                                                         |          |
| 190.01                  | 19001 | FUND RAISING                                           | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 0 190.01 |
| 190.02                  | 19002 | RUSH DAY SCHOOL                                        | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 0 190.02 |
| 191.00                  | 19100 | RESEARCH                                               | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 0 191.00 |
| 191.01                  | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY                    | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 0 191.01 |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 0                                              | 0                             | 2,602                                     | 2,602                                    | 0                                                                             | 0 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 0                                              | 0                             | 2,583                                     | 2,583                                    | 0                                                                             | 0 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                                              | 0                             | 8                                         | 8                                        | 0                                                                             | 0 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 0 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 0 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 0 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                              | 0                             | 0                                         | 0                                        | 0                                                                             | 0 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                |                               |                                           |                                          |                                                                               | 200.00   |
| 201.00                  |       | Negative Cost Centers                                  |                                                |                               |                                           |                                          |                                                                               | 201.00   |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 1,300,461                                      | 8,407,850                     | 64,122,172                                | 11,246,845                               | 1,412,450                                                                     | 202.00   |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 130.946100                                     | 349.598753                    | 1,397.514809                              | 245.120088                               | 0.002180                                                                      | 203.00   |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            | 21,390                                         | 1,744,651                     | 1,189,317                                 | 690,535                                  | 242,055                                                                       | 204.00   |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                | 2.139000                                       | 20.160998                     | 25.920646                                 | 15.049910                                | 0.000290                                                                      | 205.00   |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) |                                                | 0                             |                                           |                                          | 0                                                                             | 206.00   |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  |                                                | 0.000000                      |                                           |                                          | 0.000000                                                                      | 207.00   |

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Worksheet B-1

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11/24/2019 4:22 pm

| Cost Center Description      |       | PARAMED<br>MEDICAL<br>PERFUSION TECH<br>(DIRECT LAB) | PARAMED<br>DIETARY<br>(MEALS SERVED) | PARAMED SPEECH<br>(DIRECT<br>SPEECH) | PARAMED<br>OCCUPATIONAL<br>THERAPY<br>(DIRECT<br>OCCUPATIONAL<br>THERAPY) | PARAMED<br>MEDICAL<br>PHYSICS<br>(DIRECT<br>RADIOLOGY) |       |
|------------------------------|-------|------------------------------------------------------|--------------------------------------|--------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------|-------|
|                              |       | 23.01                                                | 23.02                                | 23.03                                | 23.04                                                                     | 23.05                                                  |       |
| GENERAL SERVICE COST CENTERS |       |                                                      |                                      |                                      |                                                                           |                                                        |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT                            |                                      |                                      |                                                                           |                                                        | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL                            |                                      |                                      |                                                                           |                                                        | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG                             |                                      |                                      |                                                                           |                                                        | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV                             |                                      |                                      |                                                                           |                                                        | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH                             |                                      |                                      |                                                                           |                                                        | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV                              |                                      |                                      |                                                                           |                                                        | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH                          |                                      |                                      |                                                                           |                                                        | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH                          |                                      |                                      |                                                                           |                                                        | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                                 |                                      |                                      |                                                                           |                                                        | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY                       |                                      |                                      |                                                                           |                                                        | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III                            |                                      |                                      |                                                                           |                                                        | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                                     |                                      |                                      |                                                                           |                                                        | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                                     |                                      |                                      |                                                                           |                                                        | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT                               |                                      |                                      |                                                                           |                                                        | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS                             |                                      |                                      |                                                                           |                                                        | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                                 |                                      |                                      |                                                                           |                                                        | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                                    |                                      |                                      |                                                                           |                                                        | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                                   |                                      |                                      |                                                                           |                                                        | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP                            |                                      |                                      |                                                                           |                                                        | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                                     |                                      |                                      |                                                                           |                                                        | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                                 |                                      |                                      |                                                                           |                                                        | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                                   |                                      |                                      |                                                                           |                                                        | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH                              |                                      |                                      |                                                                           |                                                        | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                                         |                                      |                                      |                                                                           |                                                        | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                                |                                      |                                      |                                                                           |                                                        | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                                       |                                      |                                      |                                                                           |                                                        | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH                              |                                      |                                      |                                                                           |                                                        | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT                         |                                      |                                      |                                                                           |                                                        | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT                               |                                      |                                      |                                                                           |                                                        | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                                       |                                      |                                      |                                                                           |                                                        | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION                              |                                      |                                      |                                                                           |                                                        | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE                             |                                      |                                      |                                                                           |                                                        | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE                            |                                      |                                      |                                                                           |                                                        | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB                               |                                      |                                      |                                                                           |                                                        | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE                               |                                      |                                      |                                                                           |                                                        | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                                 |                                      |                                      |                                                                           |                                                        | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                                     |                                      |                                      |                                                                           |                                                        | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                                         |                                      |                                      |                                                                           |                                                        | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION                             |                                      |                                      |                                                                           |                                                        | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                                |                                      |                                      |                                                                           |                                                        | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                                   |                                      |                                      |                                                                           |                                                        | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE                              |                                      |                                      |                                                                           |                                                        | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                                         |                                      |                                      |                                                                           |                                                        | 9.00  |
| 10.00                        | 01000 | DIETARY                                              |                                      |                                      |                                                                           |                                                        | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                                 |                                      |                                      |                                                                           |                                                        | 10.01 |
| 11.00                        | 01100 | CAFETERIA                                            |                                      |                                      |                                                                           |                                                        | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION                               |                                      |                                      |                                                                           |                                                        | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY                            |                                      |                                      |                                                                           |                                                        | 14.00 |
| 15.00                        | 01500 | PHARMACY                                             |                                      |                                      |                                                                           |                                                        | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY                            |                                      |                                      |                                                                           |                                                        | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY                            |                                      |                                      |                                                                           |                                                        | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED                               |                                      |                                      |                                                                           |                                                        | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED                               |                                      |                                      |                                                                           |                                                        | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                                |                                      |                                      |                                                                           |                                                        | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG                              |                                      |                                      |                                                                           |                                                        | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH                             |                                      |                                      |                                                                           |                                                        | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH                              |                                      |                                      |                                                                           |                                                        | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD                              |                                      |                                      |                                                                           |                                                        | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT                             |                                      |                                      |                                                                           |                                                        | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR                              |                                      |                                      |                                                                           |                                                        | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS                              |                                      |                                      |                                                                           |                                                        | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS                             |                                      |                                      |                                                                           |                                                        | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT                          |                                      |                                      |                                                                           |                                                        | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                                 |                                      |                                      |                                                                           |                                                        | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS                            |                                      |                                      |                                                                           |                                                        | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                                       |                                      |                                      |                                                                           |                                                        | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD                 |                                      |                                      |                                                                           |                                                        | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD                 |                                      |                                      |                                                                           |                                                        | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT                     |                                      |                                      |                                                                           |                                                        | 23.00 |

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11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PARAMED<br>MEDICAL<br>PERFUSION TECH<br>(DIRECT LAB) | PARAMED<br>DIETARY<br>(MEALS SERVED) | PARAMED SPEECH<br>(DIRECT<br>SPEECH) | PARAMED<br>OCCUPATIONAL<br>THERAPY<br>(DIRECT<br>OCCUPATIONAL<br>THERAPY) | PARAMED<br>MEDICAL<br>PHYSICS<br>(DIRECT<br>RADIOLOGY) |        |
|----------------------------------------|-------|----------------------------------------|------------------------------------------------------|--------------------------------------|--------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------|--------|
|                                        |       |                                        | 23.01                                                | 23.02                                | 23.03                                | 23.04                                                                     | 23.05                                                  |        |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 10,000                                               |                                      |                                      |                                                                           |                                                        | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        |                                                      | 450,704                              |                                      |                                                                           |                                                        | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         |                                                      |                                      | 10,000                               |                                                                           |                                                        | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           |                                                      |                                      |                                      | 10,000                                                                    |                                                        | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                |                                                      |                                      |                                      |                                                                           | 10,000                                                 | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  |                                                      |                                      |                                      |                                                                           |                                                        | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     |                                                      |                                      |                                      |                                                                           |                                                        | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            |                                                      |                                      |                                      |                                                                           |                                                        | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       |                                                      |                                      |                                      |                                                                           |                                                        | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            |                                                      |                                      |                                      |                                                                           |                                                        | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           |                                                      |                                      |                                      |                                                                           |                                                        | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                      |                                      |                                      |                                                                           |                                                        |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 0                                                    | 324,810                              | 0                                    | 0                                                                         | 0                                                      | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 0                                                    | 33,170                               | 0                                    | 0                                                                         | 0                                                      | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 0                                                    | 34,912                               | 0                                    | 0                                                                         | 0                                                      | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 0                                                    | 9,110                                | 0                                    | 0                                                                         | 0                                                      | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 0                                                    | 21,024                               | 0                                    | 0                                                                         | 0                                                      | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 0                                                    | 27,678                               | 0                                    | 0                                                                         | 0                                                      | 41.00  |
| 43.00                                  | 04300 | NURSEY                                 | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                      |                                      |                                      |                                                                           |                                                        |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 0                                                    | 0                                    | 0                                    | 0                                                                         | 5,000                                                  | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 0                                                    | 0                                    | 0                                    | 0                                                                         | 5,000                                                  | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 10,000                                               | 0                                    | 0                                    | 0                                                                         | 0                                                      | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 0                                                    | 0                                    | 0                                    | 10,000                                                                    | 0                                                      | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 0                                                    | 0                                    | 10,000                               | 0                                                                         | 0                                                      | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                      |                                      |                                      |                                                                           |                                                        |        |
| 90.00                                  | 09000 | CLINIC                                 | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                      |                                      |                                      |                                                                           |                                                        |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                      |                                      |                                      |                                                                           |                                                        |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 10,000                                               | 450,704                              | 10,000                               | 10,000                                                                    | 10,000                                                 | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                      |                                      |                                      |                                                                           |                                                        |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 191.01 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | PARAMED<br>MEDICAL<br>PERFUSION TECH<br>(DIRECT LAB) | PARAMED<br>DIETARY<br>(MEALS SERVED) | PARAMED SPEECH<br>(DIRECT<br>SPEECH) | PARAMED<br>OCCUPATIONAL<br>THERAPY<br>(DIRECT<br>OCCUPATIONAL<br>THERAPY) | PARAMED<br>MEDICAL<br>PHYSICS<br>(DIRECT<br>RADIOLOGY) |        |
|-------------------------|-------|--------------------------------------------------------|------------------------------------------------------|--------------------------------------|--------------------------------------|---------------------------------------------------------------------------|--------------------------------------------------------|--------|
|                         |       |                                                        | 23.01                                                | 23.02                                | 23.03                                | 23.04                                                                     | 23.05                                                  |        |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                      |                                      |                                      |                                                                           |                                                        | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                                      |                                      |                                      |                                                                           |                                                        | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 235,288                                              | -16,165                              | -56,792                              | 110,473                                                                   | 431,211                                                | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 23.528800                                            | 0.000000                             | 0.000000                             | 11.047300                                                                 | 43.121100                                              | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            | 81,115                                               | 84,657                               | 316,762                              | 205,296                                                                   | 29,285                                                 | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                | 2.768700                                             | 0.187833                             | 31.676200                            | 1.529600                                                                  | 2.928500                                               | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) | 0                                                    | 0                                    | 0                                    | 0                                                                         | 0                                                      | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  | 0.000000                                             | 0.000000                             | 0.000000                             | 0.000000                                                                  | 0.000000                                               | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | PARAMED<br>PASTORAL CARE<br>(DIRECT COST<br>REVENUE<br>CENTERS) | PARAMED<br>TECHNOLOGY<br>(DIRECT LAB) | PARAMED<br>VASCULAR<br>ULTRASOUND<br>(DIRECT<br>RADIOLOGY) | PARAMED<br>PHARMACY<br>(DIRECT<br>PHARMACY) | PARAMED<br>RESPIRATORY<br>THERAPY<br>(DIRECT<br>RESPIRATORY<br>THERAPY) |       |
|------------------------------|-------|-----------------------------------------------------------------|---------------------------------------|------------------------------------------------------------|---------------------------------------------|-------------------------------------------------------------------------|-------|
|                              |       | 23.06                                                           | 23.07                                 | 23.08                                                      | 23.09                                       | 23.10                                                                   |       |
| GENERAL SERVICE COST CENTERS |       |                                                                 |                                       |                                                            |                                             |                                                                         |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT                                       |                                       |                                                            |                                             |                                                                         | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL                                       |                                       |                                                            |                                             |                                                                         | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG                                        |                                       |                                                            |                                             |                                                                         | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV                                        |                                       |                                                            |                                             |                                                                         | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH                                        |                                       |                                                            |                                             |                                                                         | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV                                         |                                       |                                                            |                                             |                                                                         | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH                                     |                                       |                                                            |                                             |                                                                         | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH                                     |                                       |                                                            |                                             |                                                                         | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                                            |                                       |                                                            |                                             |                                                                         | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY                                  |                                       |                                                            |                                             |                                                                         | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III                                       |                                       |                                                            |                                             |                                                                         | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                                                |                                       |                                                            |                                             |                                                                         | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                                                |                                       |                                                            |                                             |                                                                         | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT                                          |                                       |                                                            |                                             |                                                                         | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS                                        |                                       |                                                            |                                             |                                                                         | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                                            |                                       |                                                            |                                             |                                                                         | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                                               |                                       |                                                            |                                             |                                                                         | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                                              |                                       |                                                            |                                             |                                                                         | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP                                       |                                       |                                                            |                                             |                                                                         | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                                                |                                       |                                                            |                                             |                                                                         | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                                            |                                       |                                                            |                                             |                                                                         | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                                              |                                       |                                                            |                                             |                                                                         | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH                                         |                                       |                                                            |                                             |                                                                         | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                                                    |                                       |                                                            |                                             |                                                                         | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                                           |                                       |                                                            |                                             |                                                                         | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                                                  |                                       |                                                            |                                             |                                                                         | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH                                         |                                       |                                                            |                                             |                                                                         | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT                                    |                                       |                                                            |                                             |                                                                         | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT                                          |                                       |                                                            |                                             |                                                                         | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                                                  |                                       |                                                            |                                             |                                                                         | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION                                         |                                       |                                                            |                                             |                                                                         | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE                                        |                                       |                                                            |                                             |                                                                         | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE                                       |                                       |                                                            |                                             |                                                                         | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB                                          |                                       |                                                            |                                             |                                                                         | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE                                          |                                       |                                                            |                                             |                                                                         | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                                            |                                       |                                                            |                                             |                                                                         | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                                                |                                       |                                                            |                                             |                                                                         | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                                                    |                                       |                                                            |                                             |                                                                         | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION                                        |                                       |                                                            |                                             |                                                                         | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                                           |                                       |                                                            |                                             |                                                                         | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                                              |                                       |                                                            |                                             |                                                                         | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE                                         |                                       |                                                            |                                             |                                                                         | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                                                    |                                       |                                                            |                                             |                                                                         | 9.00  |
| 10.00                        | 01000 | DIETARY                                                         |                                       |                                                            |                                             |                                                                         | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                                            |                                       |                                                            |                                             |                                                                         | 10.01 |
| 11.00                        | 01100 | CAFETERIA                                                       |                                       |                                                            |                                             |                                                                         | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION                                          |                                       |                                                            |                                             |                                                                         | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY                                       |                                       |                                                            |                                             |                                                                         | 14.00 |
| 15.00                        | 01500 | PHARMACY                                                        |                                       |                                                            |                                             |                                                                         | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY                                       |                                       |                                                            |                                             |                                                                         | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY                                       |                                       |                                                            |                                             |                                                                         | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED                                          |                                       |                                                            |                                             |                                                                         | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED                                          |                                       |                                                            |                                             |                                                                         | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                                           |                                       |                                                            |                                             |                                                                         | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG                                         |                                       |                                                            |                                             |                                                                         | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH                                        |                                       |                                                            |                                             |                                                                         | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH                                         |                                       |                                                            |                                             |                                                                         | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD                                         |                                       |                                                            |                                             |                                                                         | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT                                        |                                       |                                                            |                                             |                                                                         | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR                                         |                                       |                                                            |                                             |                                                                         | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS                                         |                                       |                                                            |                                             |                                                                         | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS                                        |                                       |                                                            |                                             |                                                                         | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT                                     |                                       |                                                            |                                             |                                                                         | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                                            |                                       |                                                            |                                             |                                                                         | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS                                       |                                       |                                                            |                                             |                                                                         | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                                                  |                                       |                                                            |                                             |                                                                         | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD                            |                                       |                                                            |                                             |                                                                         | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD                            |                                       |                                                            |                                             |                                                                         | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT                                |                                       |                                                            |                                             |                                                                         | 23.00 |

## COST ALLOCATION - STATISTICAL BASIS

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11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PARAMED<br>PASTORAL CARE<br>(DIRECT COST<br>REVENUE<br>CENTERS) | PARAMED<br>TECHNOLOGY<br>(DIRECT LAB) | PARAMED<br>VASCULAR<br>ULTRASOUND<br>(DIRECT<br>RADIOLOGY) | PARAMED<br>PHARMACY<br>(DIRECT<br>PHARMACY) | PARAMED<br>RESPIRATORY<br>THERAPY<br>(DIRECT<br>RESPIRATORY<br>THERAPY) |        |
|----------------------------------------|-------|----------------------------------------|-----------------------------------------------------------------|---------------------------------------|------------------------------------------------------------|---------------------------------------------|-------------------------------------------------------------------------|--------|
|                                        |       |                                        | 23.06                                                           | 23.07                                 | 23.08                                                      | 23.09                                       | 23.10                                                                   |        |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         | 647,774,678                                                     | 10,000                                | 10,000                                                     | 10,000                                      | 10,000                                                                  | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        |                                                                 |                                       |                                                            |                                             |                                                                         | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         |                                                                 |                                       |                                                            |                                             |                                                                         | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           |                                                                 |                                       |                                                            |                                             |                                                                         | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                |                                                                 |                                       |                                                            |                                             |                                                                         | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  |                                                                 |                                       |                                                            |                                             |                                                                         | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     |                                                                 |                                       |                                                            |                                             |                                                                         | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            |                                                                 |                                       |                                                            |                                             |                                                                         | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       |                                                                 |                                       |                                                            |                                             |                                                                         | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            |                                                                 |                                       |                                                            |                                             |                                                                         | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           |                                                                 |                                       |                                                            |                                             |                                                                         | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                                 |                                       |                                                            |                                             |                                                                         |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 100,331,454                                                     | 0                                     | 0                                                          | 0                                           | 0                                                                       | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 23,771,716                                                      | 0                                     | 0                                                          | 0                                           | 0                                                                       | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 27,065,781                                                      | 0                                     | 0                                                          | 0                                           | 0                                                                       | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 7,946,371                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 17,526,766                                                      | 0                                     | 0                                                          | 0                                           | 0                                                                       | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 7,855,638                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 7,351,349                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                                 |                                       |                                                            |                                             |                                                                         |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 122,293,187                                                     | 0                                     | 0                                                          | 0                                           | 0                                                                       | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 8,696,641                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 8,729,123                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 10,662,708                                                      | 0                                     | 0                                                          | 0                                           | 0                                                                       | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 37,199,191                                                      | 0                                     | 5,000                                                      | 0                                           | 0                                                                       | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 11,433,118                                                      | 0                                     | 5,000                                                      | 0                                           | 0                                                                       | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 4,218,202                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 68,123,692                                                      | 10,000                                | 0                                                          | 0                                           | 0                                                                       | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 1,852,804                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    |                                                                 | 0                                     | 0                                                          | 0                                           | 0                                                                       | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 11,403,766                                                      | 0                                     | 0                                                          | 0                                           | 0                                                                       | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 1,577                                                           | 0                                     | 0                                                          | 0                                           | 0                                                                       | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 11,118,827                                                      | 0                                     | 0                                                          | 0                                           | 10,000                                                                  | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 6,480,418                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 5,049,908                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 3,722,121                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 26,087,502                                                      | 0                                     | 0                                                          | 0                                           | 0                                                                       | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 1,830,395                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                                               | 0                                     | 0                                                          | 10,000                                      | 0                                                                       | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 3,350,004                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 4,144,400                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                                 |                                       |                                                            |                                             |                                                                         |        |
| 90.00                                  | 09000 | CLINIC                                 | 81,698,533                                                      | 0                                     | 0                                                          | 0                                           | 0                                                                       | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 18,763,791                                                      | 0                                     | 0                                                          | 0                                           | 0                                                                       | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   |                                                                 | 0                                     | 0                                                          | 0                                           | 0                                                                       | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                                 |                                       |                                                            |                                             |                                                                         |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                                 |                                       |                                                            |                                             |                                                                         |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 6,507,586                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 2,247,215                                                       | 0                                     | 0                                                          | 0                                           | 0                                                                       | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 310,894                                                         | 0                                     | 0                                                          | 0                                           | 0                                                                       | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               |                                                                 |                                       |                                                            |                                             |                                                                         | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 647,774,678                                                     | 10,000                                | 10,000                                                     | 10,000                                      | 10,000                                                                  | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                                 |                                       |                                                            |                                             |                                                                         |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 191.01 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description |       |                                                        | PARAMED<br>PASTORAL CARE<br>(DIRECT COST<br>REVENUE<br>CENTERS) | PARAMED<br>TECHNOLOGY<br>(DIRECT LAB) | PARAMED<br>VASCULAR<br>ULTRASOUND<br>(DIRECT<br>RADIOLOGY) | PARAMED<br>PHARMACY<br>(DIRECT<br>PHARMACY) | PARAMED<br>RESPIRATORY<br>THERAPY<br>(DIRECT<br>RESPIRATORY<br>THERAPY) |        |
|-------------------------|-------|--------------------------------------------------------|-----------------------------------------------------------------|---------------------------------------|------------------------------------------------------------|---------------------------------------------|-------------------------------------------------------------------------|--------|
|                         |       |                                                        | 23.06                                                           | 23.07                                 | 23.08                                                      | 23.09                                       | 23.10                                                                   |        |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                         | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                            | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                        | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                    | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                              | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 194.03 |
| 194.04                  | 07954 | CON - GNE                                              | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                 |                                                                 |                                       |                                                            |                                             |                                                                         | 200.00 |
| 201.00                  |       | Negative Cost Centers                                  |                                                                 |                                       |                                                            |                                             |                                                                         | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B, Part I)             | 986,601                                                         | 173,609                               | 89,550                                                     | 1,017,024                                   | 563,638                                                                 | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                 | 0.001523                                                        | 17.360900                             | 8.955000                                                   | 101.702400                                  | 56.363800                                                               | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B, Part II)            | 98,663                                                          | 147,497                               | 49,504                                                     | 15,925                                      | 77,792                                                                  | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part II)                | 0.000152                                                        | 2.313300                              | 1.106400                                                   | 1.592500                                    | 7.779200                                                                | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated (per Wkst. B-2) | 0                                                               | 0                                     | 0                                                          | 0                                           | 0                                                                       | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D, Parts III and IV)  | 0.000000                                                        | 0.000000                              | 0.000000                                                   | 0.000000                                    | 0.000000                                                                | 207.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description      |       | PARAMED<br>PHYSICIANS<br>ASSISTANT<br>(DIRECT COST<br>REVENUE<br>CENTERS) |       |
|------------------------------|-------|---------------------------------------------------------------------------|-------|
|                              |       | 23.11                                                                     |       |
| GENERAL SERVICE COST CENTERS |       |                                                                           |       |
| 1.00                         | 00100 | CAP REL COSTS-BLDG & FIXT                                                 | 1.00  |
| 1.01                         | 00101 | DEPRECIATION OLD HOSPITAL                                                 | 1.01  |
| 1.02                         | 00102 | DEPRECIATION DIRECT BLDG                                                  | 1.02  |
| 1.03                         | 00103 | DEPRECIATION KELLOGG PAV                                                  | 1.03  |
| 1.04                         | 00104 | DEPRECIATION JELKE SOUTH                                                  | 1.04  |
| 1.05                         | 00105 | DEPRECIATION ATRIUM PAV                                                   | 1.05  |
| 1.06                         | 00106 | DEPRECIATION PRO BLDG NORTH                                               | 1.06  |
| 1.07                         | 00107 | DEPRECIATION PRO BLDG SOUTH                                               | 1.07  |
| 1.08                         | 00108 | DEPRECIATION WOOD ST                                                      | 1.08  |
| 1.09                         | 00109 | DEPRECIATION ACADEMIC FACILITY                                            | 1.09  |
| 1.10                         | 00110 | DEPRECIATION PRO BLDG III                                                 | 1.10  |
| 1.11                         | 00111 | DEPRECIATION JRB                                                          | 1.11  |
| 1.12                         | 00112 | DEPRECIATION TOB                                                          | 1.12  |
| 1.13                         | 00113 | DEPRECIATION EQUIPMENT                                                    | 1.13  |
| 1.14                         | 00114 | DEPRECIATION ORTHOPEDICS                                                  | 1.14  |
| 1.15                         | 00115 | DEPRECIATION KIDSTON                                                      | 1.15  |
| 1.16                         | 00116 | DEPRECIATION COHN                                                         | 1.16  |
| 1.17                         | 00117 | DEPRECIATION TOWER                                                        | 1.17  |
| 2.00                         | 00200 | CAP REL COSTS-MVBLE EQUIP                                                 | 2.00  |
| 2.01                         | 00201 | INTEREST GENERAL                                                          | 2.01  |
| 2.02                         | 00202 | INTEREST DIRECT BLDG                                                      | 2.02  |
| 2.03                         | 00203 | INTEREST ATRUM PAV                                                        | 2.03  |
| 2.04                         | 00204 | INTEREST PRO BLDG SOUTH                                                   | 2.04  |
| 2.05                         | 00205 | INTEREST TOB                                                              | 2.05  |
| 2.06                         | 00206 | INTEREST PRO BLDG III                                                     | 2.06  |
| 2.07                         | 00207 | INTEREST TOWER                                                            | 2.07  |
| 2.08                         | 00208 | INTEREST PRO BLDG NORTH                                                   | 2.08  |
| 4.00                         | 00400 | EMPLOYEE BENEFITS DEPARTMENT                                              | 4.00  |
| 5.01                         | 00590 | TRANSITION RECRUITMENT                                                    | 5.01  |
| 5.02                         | 00540 | PARKING GARAGE                                                            | 5.02  |
| 5.03                         | 00591 | RESEARCH ADMINISTRATION                                                   | 5.03  |
| 5.04                         | 00592 | ADMIN & GEN INPT SERVICE                                                  | 5.04  |
| 5.05                         | 00593 | ADMIN & GEN OUTPT SERVICE                                                 | 5.05  |
| 5.06                         | 00594 | ADMIN & GEN ANIMAL LAB                                                    | 5.06  |
| 5.07                         | 00595 | ADMIN & GEN PT SERVICE                                                    | 5.07  |
| 5.08                         | 00596 | PERSONNEL DEPARTMENT                                                      | 5.08  |
| 5.09                         | 00597 | RESEARCH FACULTY                                                          | 5.09  |
| 5.10                         | 00598 | RESEARCH SPA                                                              | 5.10  |
| 5.11                         | 00560 | CORPORATE ADMINISTRATION                                                  | 5.11  |
| 6.00                         | 00600 | MAINTENANCE & REPAIRS                                                     | 6.00  |
| 6.01                         | 00601 | RENTED SPACE COSTS                                                        | 6.01  |
| 8.00                         | 00800 | LAUNDRY & LINEN SERVICE                                                   | 8.00  |
| 9.00                         | 00900 | HOUSEKEEPING                                                              | 9.00  |
| 10.00                        | 01000 | DIETARY                                                                   | 10.00 |
| 10.01                        | 01001 | PATIENT FOOD SERVICE                                                      | 10.01 |
| 11.00                        | 01100 | CAFETERIA                                                                 | 11.00 |
| 13.00                        | 01300 | NURSING ADMINISTRATION                                                    | 13.00 |
| 14.00                        | 01400 | CENTRAL SERVICES & SUPPLY                                                 | 14.00 |
| 15.00                        | 01500 | PHARMACY                                                                  | 15.00 |
| 16.00                        | 01600 | MEDICAL RECORDS & LIBRARY                                                 | 16.00 |
| 16.01                        | 01601 | MEDICAL RECORDS & LIBRARY                                                 | 16.01 |
| 18.00                        | 01850 | CLINICAL LAB ADMIN MED                                                    | 18.00 |
| 18.01                        | 01080 | CLINICAL LAB ADMIN PED                                                    | 18.01 |
| 18.02                        | 01851 | CLINICAL LAB ADMIN OB                                                     | 18.02 |
| 18.03                        | 01852 | CLINICAL LAB ADMIN SURG                                                   | 18.03 |
| 18.04                        | 01853 | CLINICAL LAB ADMIN PSYCH                                                  | 18.04 |
| 18.05                        | 01854 | CLINICAL LAB ADMIN PATH                                                   | 18.05 |
| 18.06                        | 01855 | CLINICAL LAB ADMIN CARD                                                   | 18.06 |
| 18.07                        | 01856 | CLINICAL LAB ADMIN HEMAT                                                  | 18.07 |
| 18.08                        | 01857 | CLINICAL LAB ADMIN NEUR                                                   | 18.08 |
| 18.09                        | 01858 | CLINICAL LAB ADMIN OCLS                                                   | 18.09 |
| 18.12                        | 01859 | DISCRETIONARY OPERATIONS                                                  | 18.12 |
| 18.14                        | 01860 | RUSH UNIVERSITY ADMIN SPLIT                                               | 18.14 |
| 18.16                        | 01861 | NURSING SCHOOL SPLIT                                                      | 18.16 |
| 19.00                        | 01900 | NONPHYSICIAN ANESTHETISTS                                                 | 19.00 |
| 20.00                        | 02000 | NURSING SCHOOL                                                            | 20.00 |
| 21.00                        | 02100 | I&R SERVICES-SALARY & FRINGES APPRVD                                      | 21.00 |
| 22.00                        | 02200 | I&R SERVICES-OTHER PRGM COSTS APPRVD                                      | 22.00 |
| 23.00                        | 02300 | PARAMED HEALTH SYSTEM MANAGEMENT                                          | 23.00 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                        | PARAMED PHYSICIANS ASSISTANT (DIRECT COST REVENUE CENTERS) |        |
|----------------------------------------|-------|----------------------------------------|------------------------------------------------------------|--------|
|                                        |       |                                        | 23.11                                                      |        |
| 23.01                                  | 02301 | PARAMED MEDICAL PERFUSION TECH         |                                                            | 23.01  |
| 23.02                                  | 02302 | PARAMED DIETARY                        |                                                            | 23.02  |
| 23.03                                  | 02303 | PARAMED SPEECH                         |                                                            | 23.03  |
| 23.04                                  | 02304 | PARAMED OCCUPATIONAL THERAPY           |                                                            | 23.04  |
| 23.05                                  | 02305 | PARAMED MEDICAL PHYSICS                |                                                            | 23.05  |
| 23.06                                  | 02306 | PARAMED PASTORAL CARE                  |                                                            | 23.06  |
| 23.07                                  | 02307 | PARAMED TECHNOLOGY                     |                                                            | 23.07  |
| 23.08                                  | 02308 | PARAMED VASCULAR ULTRASOUND            |                                                            | 23.08  |
| 23.09                                  | 02309 | PARAMED PHARMACY                       |                                                            | 23.09  |
| 23.10                                  | 02310 | PARAMED RESPIRATORY THERAPY            |                                                            | 23.10  |
| 23.11                                  | 02311 | PARAMED PHYSICIANS ASSISTANT           | 647,774,678                                                | 23.11  |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                        |                                                            |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                    | 100,331,454                                                | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT           | 23,771,716                                                 | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT            | 27,065,781                                                 | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT          | 7,946,371                                                  | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT          | 17,526,766                                                 | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                      | 7,855,638                                                  | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                      | 7,351,349                                                  | 41.00  |
| 43.00                                  | 04300 | NURSERY                                | 0                                                          | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                        |                                                            |        |
| 50.00                                  | 05000 | OPERATING ROOM                         | 122,293,187                                                | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                          | 8,696,641                                                  | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM             | 8,729,123                                                  | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                         | 10,662,708                                                 | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                   | 37,199,191                                                 | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                  | 11,433,118                                                 | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                           | 4,218,202                                                  | 56.00  |
| 60.00                                  | 06000 | LABORATORY                             | 68,123,692                                                 | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                       | 1,852,804                                                  | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY    |                                                            | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS   | 11,403,766                                                 | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                    | 1,577                                                      | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                    | 11,118,827                                                 | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                       | 6,480,418                                                  | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                   | 5,049,908                                                  | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                       | 3,722,121                                                  | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                      | 26,087,502                                                 | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY                 | 1,830,395                                                  | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS   | 0                                                          | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS         | 0                                                          | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS              | 0                                                          | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                         | 0                                                          | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                   | 3,350,004                                                  | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                     | 4,144,400                                                  | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                        |                                                            |        |
| 90.00                                  | 09000 | CLINIC                                 | 81,698,533                                                 | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                              | 18,763,791                                                 | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)   |                                                            | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)       | 0                                                          | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                      | 0                                                          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                        |                                                            |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                  | 0                                                          | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS        | 0                                                          | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM           | 0                                                          | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                        |                                                            |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                     | 6,507,586                                                  | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                      | 0                                                          | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                      | 2,247,215                                                  | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                       | 0                                                          | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                   | 310,894                                                    | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)      | 0                                                          | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF               | 0                                                          | 114.00 |
| 118.00                                 |       | SUBTOTALS (SUM OF LINES 1 through 117) | 647,774,678                                                | 118.00 |
| NONREIMBURSABLE COST CENTERS           |       |                                        |                                                            |        |
| 190.00                                 | 19000 | GIFT, FLOWER, COFFEE SHOP & CANTEEN    | 0                                                          | 190.00 |
| 190.01                                 | 19001 | FUND RAISING                           | 0                                                          | 190.01 |
| 190.02                                 | 19002 | RUSH DAY SCHOOL                        | 0                                                          | 190.02 |
| 191.00                                 | 19100 | RESEARCH                               | 0                                                          | 191.00 |
| 191.01                                 | 19101 | OTHER SPONSORED PROJECTS/DRUG STUDY    | 0                                                          | 191.01 |

## COST ALLOCATION - STATISTICAL BASIS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-1

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11/24/2019 4:22 pm

| Cost Center Description |       |                                                           | PARAMED<br>PHYSICIANS<br>ASSISTANT<br>(DIRECT COST<br>REVENUE<br>CENTERS) |        |
|-------------------------|-------|-----------------------------------------------------------|---------------------------------------------------------------------------|--------|
|                         |       |                                                           | 23.11                                                                     |        |
| 191.02                  | 19102 | DEPARTMENTAL PROJECTS/RESEARCH                            | 0                                                                         | 191.02 |
| 192.00                  | 19200 | PHYSICIANS' PRIVATE OFFICES                               | 0                                                                         | 192.00 |
| 194.00                  | 07950 | MEDICAL COLLEGE                                           | 0                                                                         | 194.00 |
| 194.01                  | 07951 | AFFIL CORP ARC VENTURES                                   | 0                                                                         | 194.01 |
| 194.02                  | 07952 | AFFIL CORP ROOM 500                                       | 0                                                                         | 194.02 |
| 194.03                  | 07953 | AFFIL CORP JOINT VENTURES                                 | 0                                                                         | 194.03 |
| 194.04                  | 07954 | CON - GNE                                                 | 0                                                                         | 194.04 |
| 200.00                  |       | Cross Foot Adjustments                                    |                                                                           | 200.00 |
| 201.00                  |       | Negative Cost Centers                                     |                                                                           | 201.00 |
| 202.00                  |       | Cost to be allocated (per Wkst. B,<br>Part I)             | 202,502                                                                   | 202.00 |
| 203.00                  |       | Unit cost multiplier (Wkst. B, Part I)                    | 0.000313                                                                  | 203.00 |
| 204.00                  |       | Cost to be allocated (per Wkst. B,<br>Part II)            | 213,289                                                                   | 204.00 |
| 205.00                  |       | Unit cost multiplier (Wkst. B, Part<br>II)                | 0.000040                                                                  | 205.00 |
| 206.00                  |       | NAHE adjustment amount to be allocated<br>(per Wkst. B-2) | 0                                                                         | 206.00 |
| 207.00                  |       | NAHE unit cost multiplier (Wkst. D,<br>Parts III and IV)  | 0.000000                                                                  | 207.00 |

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet B-2

Date/Time Prepared:  
11/24/2019 4:22 pm

|      |  | Description                             | Worksheet |          | Amount |        |
|------|--|-----------------------------------------|-----------|----------|--------|--------|
|      |  |                                         | CODE      | Line No. |        |        |
|      |  |                                         | 1.00      | 2.00     | 3.00   | 4.00   |
| 1.00 |  | ADJ FOR EPO COSTS IN RENAL DIALYSIS     |           | 1        | 74.00  | 0 1.00 |
| 2.00 |  | ADJ FOR EPO COSTS IN HOME PROGRAM       |           | 1        | 94.00  | 0 2.00 |
| 3.00 |  | ADJ FOR ARANESP COSTS IN RENAL DIALYSIS |           | 1        | 74.00  | 0 3.00 |
| 4.00 |  | ADJ FOR ARANESP COSTS IN HOME PROGRAM   |           | 1        | 94.00  | 0 4.00 |
| 5.00 |  | ADJ FOR ESA COSTS IN RENAL DIALYSIS     |           | 1        | 74.00  | 0 5.00 |
| 6.00 |  | ADJ FOR ESA COSTS IN HOME PROGRAM       |           | 1        | 94.00  | 0 6.00 |

## COMPUTATION OF RATIO OF COSTS TO CHARGES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet C  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                        |       |                                      | Title XVIII                                         | Hospital              | PPS                 |             |
|----------------------------------------|-------|--------------------------------------|-----------------------------------------------------|-----------------------|---------------------|-------------|
| Cost Center Description                |       |                                      | Total Cost<br>(from Wkst. B,<br>Part I, col.<br>26) | Therapy Limit<br>Adj. | Costs               |             |
|                                        |       |                                      |                                                     |                       | Total Costs         | Total Costs |
|                                        |       |                                      |                                                     |                       | RCE<br>Disallowance |             |
|                                        |       |                                      | 1.00                                                | 2.00                  | 3.00                | 4.00        |
|                                        |       |                                      |                                                     |                       |                     | 5.00        |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                      |                                                     |                       |                     |             |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                  | 146,036,479                                         |                       | 146,036,479         | 4,535       |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT         | 33,339,714                                          |                       | 33,339,714          | 0           |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT          | 36,492,077                                          |                       | 36,492,077          | 442,329     |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT        | 10,956,076                                          |                       | 10,956,076          | 10,813      |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT        | 25,620,750                                          |                       | 25,620,750          | 7,460       |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                    | 11,257,028                                          |                       | 11,257,028          | 0           |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                    | 10,803,932                                          |                       | 10,803,932          | 386         |
| 43.00                                  | 04300 | NURSERY                              | 6,402,461                                           |                       | 6,402,461           | 0           |
| ANCILLARY SERVICE COST CENTERS         |       |                                      |                                                     |                       |                     |             |
| 50.00                                  | 05000 | OPERATING ROOM                       | 61,624,809                                          |                       | 61,624,809          | 0           |
| 51.00                                  | 05100 | RECOVERY ROOM                        | 12,540,024                                          |                       | 12,540,024          | 0           |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM           | 12,222,408                                          |                       | 12,222,408          | 0           |
| 53.00                                  | 05300 | ANESTHESIOLOGY                       | 12,852,437                                          |                       | 12,852,437          | 0           |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                 | 46,326,621                                          |                       | 46,326,621          | 60,466      |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                | 15,917,177                                          |                       | 15,917,177          | 0           |
| 56.00                                  | 05600 | RADIOISOTOPE                         | 5,747,246                                           |                       | 5,747,246           | 0           |
| 60.00                                  | 06000 | LABORATORY                           | 96,655,662                                          |                       | 96,655,662          | 631,933     |
| 60.01                                  | 06002 | LABORATORY - HLA                     | 2,283,770                                           |                       | 2,283,770           | 0           |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  | 0                                                   |                       | 0                   | 0           |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 14,638,244                                          |                       | 14,638,244          | 13,789      |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                  | 1,647,603                                           |                       | 1,647,603           | 0           |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                  | 14,964,063                                          | 0                     | 14,964,063          | 0           |
| 66.00                                  | 06600 | PHYSICAL THERAPY                     | 8,415,104                                           | 0                     | 8,415,104           | 0           |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                 | 6,503,672                                           | 0                     | 6,503,672           | 0           |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                     | 4,615,811                                           | 0                     | 4,615,811           | 0           |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                    | 14,365,081                                          |                       | 14,365,081          | 34,811      |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY               | 3,222,739                                           |                       | 3,222,739           | 0           |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 42,332,485                                          |                       | 42,332,485          | 0           |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 92,582,000                                          |                       | 92,582,000          | 0           |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS            | 202,519,278                                         |                       | 202,519,278         | 0           |
| 74.00                                  | 07400 | RENAL DIALYSIS                       | 0                                                   |                       | 0                   | 0           |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                 | 4,351,726                                           |                       | 4,351,726           | 0           |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                   | 4,695,407                                           |                       | 4,695,407           | 7,269       |
| OUTPATIENT SERVICE COST CENTERS        |       |                                      |                                                     |                       |                     |             |
| 90.00                                  | 09000 | CLINIC                               | 103,830,807                                         |                       | 103,830,807         | 36,514      |
| 91.00                                  | 09100 | EMERGENCY                            | 34,571,582                                          |                       | 34,571,582          | 37,740      |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 7,650,819                                           |                       | 7,650,819           | 0           |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0                                                   |                       | 0                   | 0           |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                    | 0                                                   |                       | 0                   | 0           |
| OTHER REIMBURSABLE COST CENTERS        |       |                                      |                                                     |                       |                     |             |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                | 0                                                   |                       | 0                   | 0           |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0                                                   |                       | 0                   | 0           |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM         | 0                                                   |                       | 0                   | 0           |
| SPECIAL PURPOSE COST CENTERS           |       |                                      |                                                     |                       |                     |             |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                   | 7,740,599                                           |                       | 7,740,599           | 7,740,599   |
| 106.00                                 | 10600 | HEART ACQUISITION                    | 0                                                   |                       | 0                   | 0           |
| 107.00                                 | 10700 | LIVER ACQUISITION                    | 2,497,891                                           |                       | 2,497,891           | 2,497,891   |
| 108.00                                 | 10800 | LUNG ACQUISITION                     | 0                                                   |                       | 0                   | 0           |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                 | 344,963                                             |                       | 344,963             | 344,963     |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)    | 0                                                   |                       | 0                   | 0           |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF             | 0                                                   |                       | 0                   | 0           |
| 200.00                                 |       | Subtotal (see instructions)          | 1,118,568,545                                       | 0                     | 1,118,568,545       | 1,288,045   |
| 201.00                                 |       | Less Observation Beds                | 7,650,819                                           |                       | 7,650,819           | 7,650,819   |
| 202.00                                 |       | Total (see instructions)             | 1,110,917,726                                       | 0                     | 1,110,917,726       | 1,288,045   |

## COMPUTATION OF RATIO OF COSTS TO CHARGES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet C  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                         |                                        |                                      |               | Title XVIII   |                         | Hospital            | PPS                   |        |  |
|-------------------------|----------------------------------------|--------------------------------------|---------------|---------------|-------------------------|---------------------|-----------------------|--------|--|
| Cost Center Description |                                        |                                      | Charges       |               |                         | Cost or Other Ratio | TEFRA Inpatient Ratio |        |  |
|                         |                                        |                                      | Inpatient     | Outpatient    | Total (col. 6 + col. 7) |                     |                       |        |  |
|                         |                                        |                                      |               |               |                         |                     |                       |        |  |
|                         |                                        |                                      | 6.00          | 7.00          | 8.00                    | 9.00                | 10.00                 |        |  |
|                         | INPATIENT ROUTINE SERVICE COST CENTERS |                                      |               |               |                         |                     |                       |        |  |
| 30.00                   | 03000                                  | ADULTS & PEDIATRICS                  | 254,687,726   |               | 254,687,726             |                     |                       | 30.00  |  |
| 34.00                   | 03400                                  | SURGICAL INTENSIVE CARE UNIT         | 78,386,521    |               | 78,386,521              |                     |                       | 34.00  |  |
| 35.00                   | 02040                                  | MEDICAL INTENSIVE CARE UNIT          | 79,550,791    |               | 79,550,791              |                     |                       | 35.00  |  |
| 35.01                   | 02080                                  | PEDIATRIC INTENSIVE CARE UNIT        | 22,177,645    |               | 22,177,645              |                     |                       | 35.01  |  |
| 35.02                   | 02120                                  | PREMATURE INTENSIVE CARE UNIT        | 62,624,888    |               | 62,624,888              |                     |                       | 35.02  |  |
| 40.00                   | 04000                                  | SUBPROVIDER - IPF                    | 16,288,765    |               | 16,288,765              |                     |                       | 40.00  |  |
| 41.00                   | 04100                                  | SUBPROVIDER - IRF                    | 21,358,190    |               | 21,358,190              |                     |                       | 41.00  |  |
| 43.00                   | 04300                                  | NURSERY                              | 5,247,495     |               | 5,247,495               |                     |                       | 43.00  |  |
|                         | ANCILLARY SERVICE COST CENTERS         |                                      |               |               |                         |                     |                       |        |  |
| 50.00                   | 05000                                  | OPERATING ROOM                       | 245,661,516   | 142,946,066   | 388,607,582             | 0.158579            | 0.000000              | 50.00  |  |
| 51.00                   | 05100                                  | RECOVERY ROOM                        | 19,276,134    | 17,868,433    | 37,144,567              | 0.337600            | 0.000000              | 51.00  |  |
| 52.00                   | 05200                                  | DELIVERY ROOM & LABOR ROOM           | 23,263,986    | 3,523,224     | 26,787,210              | 0.456278            | 0.000000              | 52.00  |  |
| 53.00                   | 05300                                  | ANESTHESIOLOGY                       | 65,454,350    | 40,294,072    | 105,748,422             | 0.121538            | 0.000000              | 53.00  |  |
| 54.00                   | 05400                                  | RADIOLOGY-DIAGNOSTIC                 | 164,632,224   | 167,326,723   | 331,958,947             | 0.139555            | 0.000000              | 54.00  |  |
| 55.00                   | 05500                                  | RADIOLOGY-THERAPEUTIC                | 5,219,533     | 98,999,210    | 104,218,743             | 0.152729            | 0.000000              | 55.00  |  |
| 56.00                   | 05600                                  | RADIOISOTOPE                         | 4,651,397     | 22,326,196    | 26,977,593              | 0.213038            | 0.000000              | 56.00  |  |
| 60.00                   | 06000                                  | LABORATORY                           | 225,309,885   | 279,852,283   | 505,162,168             | 0.191336            | 0.000000              | 60.00  |  |
| 60.01                   | 06002                                  | LABORATORY - HLA                     | 340,739       | 5,006,116     | 5,346,855               | 0.427124            | 0.000000              | 60.01  |  |
| 61.00                   | 06100                                  | PBP CLINICAL LAB SERVICES-PRGM ONLY  | 0             | 0             | 0                       | 0.000000            | 0.000000              | 61.00  |  |
| 62.00                   | 06200                                  | WHOLE BLOOD & PACKED RED BLOOD CELLS | 39,526,062    | 12,250,627    | 51,776,689              | 0.282719            | 0.000000              | 62.00  |  |
| 64.00                   | 06400                                  | INTRAVENOUS THERAPY                  | 39,266,905    | 3,161,671     | 42,428,576              | 0.038832            | 0.000000              | 64.00  |  |
| 65.00                   | 06500                                  | RESPIRATORY THERAPY                  | 46,160,760    | 1,056,910     | 47,217,670              | 0.316917            | 0.000000              | 65.00  |  |
| 66.00                   | 06600                                  | PHYSICAL THERAPY                     | 19,791,436    | 10,381,611    | 30,173,047              | 0.278895            | 0.000000              | 66.00  |  |
| 67.00                   | 06700                                  | OCCUPATIONAL THERAPY                 | 17,246,416    | 3,428,694     | 20,675,110              | 0.314565            | 0.000000              | 67.00  |  |
| 68.00                   | 06800                                  | SPEECH PATHOLOGY                     | 7,795,292     | 4,519,623     | 12,314,915              | 0.374815            | 0.000000              | 68.00  |  |
| 69.00                   | 06900                                  | ELECTROCARDIOLOGY                    | 58,932,565    | 55,573,877    | 114,506,442             | 0.125452            | 0.000000              | 69.00  |  |
| 70.00                   | 07000                                  | ELECTROENCEPHALOGRAPHY               | 17,625,870    | 3,932,577     | 21,558,447              | 0.149488            | 0.000000              | 70.00  |  |
| 71.00                   | 07100                                  | MEDICAL SUPPLIES CHARGED TO PATIENTS | 81,820,757    | 37,387,041    | 119,207,798             | 0.355115            | 0.000000              | 71.00  |  |
| 72.00                   | 07200                                  | IMPL. DEV. CHARGED TO PATIENTS       | 193,962,615   | 64,998,614    | 258,961,229             | 0.357513            | 0.000000              | 72.00  |  |
| 73.00                   | 07300                                  | DRUGS CHARGED TO PATIENTS            | 239,291,260   | 503,643,018   | 742,934,278             | 0.272594            | 0.000000              | 73.00  |  |
| 74.00                   | 07400                                  | RENAL DIALYSIS                       | 0             | 0             | 0                       | 0.000000            | 0.000000              | 74.00  |  |
| 76.00                   | 03020                                  | RENAL DIALYSIS ADULT                 | 13,870,724    | 323,249       | 14,193,973              | 0.306590            | 0.000000              | 76.00  |  |
| 76.01                   | 03550                                  | PSYCH DAY HOSPITAL                   | 503           | 537,790       | 538,293                 | 8.722772            | 0.000000              | 76.01  |  |
|                         | OUTPATIENT SERVICE COST CENTERS        |                                      |               |               |                         |                     |                       |        |  |
| 90.00                   | 09000                                  | CLINIC                               | 1,176,349     | 267,524,697   | 268,701,046             | 0.386418            | 0.000000              | 90.00  |  |
| 91.00                   | 09100                                  | EMERGENCY                            | 50,053,175    | 121,661,507   | 171,714,682             | 0.201332            | 0.000000              | 91.00  |  |
| 92.00                   | 09200                                  | OBSERVATION BEDS (NON-DISTINCT PART) | 0             | 13,762,720    | 13,762,720              | 0.555909            | 0.000000              | 92.00  |  |
| 92.01                   | 09201                                  | OBSERVATION BEDS (DISTINCT PART)     | 0             | 0             | 0                       | 0.000000            | 0.000000              | 92.01  |  |
| 93.00                   | 04040                                  | BEHAVIORAL HEALTH                    | 0             | 0             | 0                       | 0.000000            | 0.000000              | 93.00  |  |
|                         | OTHER REIMBURSABLE COST CENTERS        |                                      |               |               |                         |                     |                       |        |  |
| 94.00                   | 09400                                  | HOME PROGRAM DIALYSIS                | 0             | 0             | 0                       | 0.000000            | 0.000000              | 94.00  |  |
| 98.00                   | 09850                                  | OTHER REIMBURSABLE COST CENTERS      | 0             | 0             | 0                       | 0.000000            | 0.000000              | 98.00  |  |
| 100.00                  | 10000                                  | I&R SERVICES-NOT APPRVD PRGM         | 0             | 0             | 0                       | 0.000000            | 0.000000              | 100.00 |  |
|                         | SPECIAL PURPOSE COST CENTERS           |                                      |               |               |                         |                     |                       |        |  |
| 105.00                  | 10500                                  | KIDNEY ACQUISITION                   | 14,129,000    | 0             | 14,129,000              |                     |                       | 105.00 |  |
| 106.00                  | 10600                                  | HEART ACQUISITION                    | 0             | 0             | 0                       |                     |                       | 106.00 |  |
| 107.00                  | 10700                                  | LIVER ACQUISITION                    | 2,790,000     | 0             | 2,790,000               |                     |                       | 107.00 |  |
| 108.00                  | 10800                                  | LUNG ACQUISITION                     | 0             | 0             | 0                       |                     |                       | 108.00 |  |
| 109.00                  | 10900                                  | PANCREAS ACQUISITION                 | 425,000       | 0             | 425,000                 |                     |                       | 109.00 |  |
| 112.00                  | 08600                                  | OTHER ORGAN ACQUISITION (SPECIFY)    | 0             | 0             | 0                       |                     |                       | 112.00 |  |
| 114.00                  | 11400                                  | UTILIZATION REVIEW - SNF             |               |               |                         |                     |                       | 114.00 |  |
| 200.00                  |                                        | Subtotal (see instructions)          | 2,137,996,474 | 1,882,286,549 | 4,020,283,023           |                     |                       | 200.00 |  |
| 201.00                  |                                        | Less Observation Beds                |               |               |                         |                     |                       | 201.00 |  |
| 202.00                  |                                        | Total (see instructions)             | 2,137,996,474 | 1,882,286,549 | 4,020,283,023           |                     |                       | 202.00 |  |

## COMPUTATION OF RATIO OF COSTS TO CHARGES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet C  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       | PPS Inpatient Ratio                  | Title XVIII | Hospital | PPS    |
|----------------------------------------|-------|--------------------------------------|-------------|----------|--------|
|                                        |       | 11.00                                |             |          |        |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                      |             |          |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                  |             |          | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT         |             |          | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT          |             |          | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT        |             |          | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT        |             |          | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                    |             |          | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                    |             |          | 41.00  |
| 43.00                                  | 04300 | NURSERY                              |             |          | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                      |             |          |        |
| 50.00                                  | 05000 | OPERATING ROOM                       | 0.158579    |          | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                        | 0.337600    |          | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM           | 0.456278    |          | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                       | 0.121538    |          | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                 | 0.139737    |          | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                | 0.152729    |          | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                         | 0.213038    |          | 56.00  |
| 60.00                                  | 06000 | LABORATORY                           | 0.192587    |          | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                     | 0.427124    |          | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  | 0.000000    |          | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 0.282985    |          | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                  | 0.038832    |          | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                  | 0.316917    |          | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                     | 0.278895    |          | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                 | 0.314565    |          | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                     | 0.374815    |          | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                    | 0.125756    |          | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY               | 0.149488    |          | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 0.355115    |          | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 0.357513    |          | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS            | 0.272594    |          | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                       | 0.000000    |          | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                 | 0.306590    |          | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                   | 8.736276    |          | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                      |             |          |        |
| 90.00                                  | 09000 | CLINIC                               | 0.386553    |          | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                            | 0.201551    |          | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 0.555909    |          | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0.000000    |          | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                    | 0.000000    |          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                      |             |          |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                | 0.000000    |          | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0.000000    |          | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM         |             |          | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                      |             |          |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                   |             |          | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                    |             |          | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                    |             |          | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                     |             |          | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                 |             |          | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)    |             |          | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF             |             |          | 114.00 |
| 200.00                                 |       | Subtotal (see instructions)          |             |          | 200.00 |
| 201.00                                 |       | Less Observation Beds                |             |          | 201.00 |
| 202.00                                 |       | Total (see instructions)             |             |          | 202.00 |

## COMPUTATION OF RATIO OF COSTS TO CHARGES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet C  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                        |       |                                      | Title XIX                                           |                       | Hospital      |                     |               |             |
|----------------------------------------|-------|--------------------------------------|-----------------------------------------------------|-----------------------|---------------|---------------------|---------------|-------------|
| Cost Center Description                |       |                                      | Total Cost<br>(from Wkst. B,<br>Part I, col.<br>26) | Therapy Limit<br>Adj. | Costs         |                     |               |             |
|                                        |       |                                      |                                                     |                       | Total Costs   | RCE<br>Disallowance |               | Total Costs |
|                                        |       |                                      | 1.00                                                | 2.00                  | 3.00          | 4.00                | 5.00          |             |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                      |                                                     |                       |               |                     |               |             |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                  | 160,146,714                                         |                       | 160,146,714   | 4,535               | 160,151,249   | 30.00       |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT         | 35,402,864                                          |                       | 35,402,864    | 0                   | 35,402,864    | 34.00       |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT          | 40,969,899                                          |                       | 40,969,899    | 442,329             | 41,412,228    | 35.00       |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT        | 11,670,622                                          |                       | 11,670,622    | 10,813              | 11,681,435    | 35.01       |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT        | 26,506,130                                          |                       | 26,506,130    | 7,460               | 26,513,590    | 35.02       |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                    | 12,410,157                                          |                       | 12,410,157    | 0                   | 12,410,157    | 40.00       |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                    | 11,359,143                                          |                       | 11,359,143    | 386                 | 11,359,529    | 41.00       |
| 43.00                                  | 04300 | NURSERY                              | 6,566,724                                           |                       | 6,566,724     | 0                   | 6,566,724     | 43.00       |
| ANCILLARY SERVICE COST CENTERS         |       |                                      |                                                     |                       |               |                     |               |             |
| 50.00                                  | 05000 | OPERATING ROOM                       | 67,328,037                                          |                       | 67,328,037    | 0                   | 67,328,037    | 50.00       |
| 51.00                                  | 05100 | RECOVERY ROOM                        | 12,540,024                                          |                       | 12,540,024    | 0                   | 12,540,024    | 51.00       |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM           | 12,978,020                                          |                       | 12,978,020    | 0                   | 12,978,020    | 52.00       |
| 53.00                                  | 05300 | ANESTHESIOLOGY                       | 18,135,151                                          |                       | 18,135,151    | 0                   | 18,135,151    | 53.00       |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                 | 53,199,405                                          |                       | 53,199,405    | 60,466              | 53,259,871    | 54.00       |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                | 16,927,398                                          |                       | 16,927,398    | 0                   | 16,927,398    | 55.00       |
| 56.00                                  | 05600 | RADIOISOTOPE                         | 6,512,714                                           |                       | 6,512,714     | 0                   | 6,512,714     | 56.00       |
| 60.00                                  | 06000 | LABORATORY                           | 99,338,085                                          |                       | 99,338,085    | 631,933             | 99,970,018    | 60.00       |
| 60.01                                  | 06002 | LABORATORY - HLA                     | 2,283,770                                           |                       | 2,283,770     | 0                   | 2,283,770     | 60.01       |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  | 0                                                   |                       | 0             | 0                   | 0             | 61.00       |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 14,889,567                                          |                       | 14,889,567    | 13,789              | 14,903,356    | 62.00       |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                  | 1,647,603                                           |                       | 1,647,603     | 0                   | 1,647,603     | 64.00       |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                  | 15,583,336                                          | 0                     | 15,583,336    | 0                   | 15,583,336    | 65.00       |
| 66.00                                  | 06600 | PHYSICAL THERAPY                     | 8,415,104                                           | 0                     | 8,415,104     | 0                   | 8,415,104     | 66.00       |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                 | 6,503,672                                           | 0                     | 6,503,672     | 0                   | 6,503,672     | 67.00       |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                     | 4,615,811                                           | 0                     | 4,615,811     | 0                   | 4,615,811     | 68.00       |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                    | 15,401,584                                          |                       | 15,401,584    | 34,811              | 15,436,395    | 69.00       |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY               | 3,222,739                                           |                       | 3,222,739     | 0                   | 3,222,739     | 70.00       |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 42,332,485                                          |                       | 42,332,485    | 0                   | 42,332,485    | 71.00       |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 92,582,000                                          |                       | 92,582,000    | 0                   | 92,582,000    | 72.00       |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS            | 202,519,278                                         |                       | 202,519,278   | 0                   | 202,519,278   | 73.00       |
| 74.00                                  | 07400 | RENAL DIALYSIS                       | 0                                                   |                       | 0             | 0                   | 0             | 74.00       |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                 | 5,517,997                                           |                       | 5,517,997     | 0                   | 5,517,997     | 76.00       |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                   | 7,106,795                                           |                       | 7,106,795     | 7,269               | 7,114,064     | 76.01       |
| OUTPATIENT SERVICE COST CENTERS        |       |                                      |                                                     |                       |               |                     |               |             |
| 90.00                                  | 09000 | CLINIC                               | 113,340,020                                         |                       | 113,340,020   | 36,514              | 113,376,534   | 90.00       |
| 91.00                                  | 09100 | EMERGENCY                            | 39,054,333                                          |                       | 39,054,333    | 37,740              | 39,092,073    | 91.00       |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 7,650,819                                           |                       | 7,650,819     |                     | 7,650,819     | 92.00       |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0                                                   |                       | 0             | 0                   | 0             | 92.01       |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                    | 0                                                   |                       | 0             | 0                   | 0             | 93.00       |
| OTHER REIMBURSABLE COST CENTERS        |       |                                      |                                                     |                       |               |                     |               |             |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                | 0                                                   |                       | 0             | 0                   | 0             | 94.00       |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0                                                   |                       | 0             | 0                   | 0             | 98.00       |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM         | 0                                                   |                       | 0             |                     | 0             | 100.00      |
| SPECIAL PURPOSE COST CENTERS           |       |                                      |                                                     |                       |               |                     |               |             |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                   | 7,906,505                                           |                       | 7,906,505     |                     | 7,906,505     | 105.00      |
| 106.00                                 | 10600 | HEART ACQUISITION                    | 0                                                   |                       | 0             |                     | 0             | 106.00      |
| 107.00                                 | 10700 | LIVER ACQUISITION                    | 2,497,891                                           |                       | 2,497,891     |                     | 2,497,891     | 107.00      |
| 108.00                                 | 10800 | LUNG ACQUISITION                     | 0                                                   |                       | 0             |                     | 0             | 108.00      |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                 | 344,963                                             |                       | 344,963       |                     | 344,963       | 109.00      |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)    | 0                                                   |                       | 0             |                     | 0             | 112.00      |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF             |                                                     |                       |               |                     |               | 114.00      |
| 200.00                                 |       | Subtotal (see instructions)          | 1,185,407,359                                       | 0                     | 1,185,407,359 | 1,288,045           | 1,186,695,404 | 200.00      |
| 201.00                                 |       | Less Observation Beds                | 7,650,819                                           |                       | 7,650,819     |                     | 7,650,819     | 201.00      |
| 202.00                                 |       | Total (see instructions)             | 1,177,756,540                                       | 0                     | 1,177,756,540 | 1,288,045           | 1,179,044,585 | 202.00      |

## COMPUTATION OF RATIO OF COSTS TO CHARGES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet C  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                        |       |                                      | Title XIX     |               |                         | Hospital            |                       |        |
|----------------------------------------|-------|--------------------------------------|---------------|---------------|-------------------------|---------------------|-----------------------|--------|
| Cost Center Description                |       |                                      | Charges       |               |                         | Cost or Other Ratio | TEFRA Inpatient Ratio |        |
|                                        |       |                                      | Inpatient     | Outpatient    | Total (col. 6 + col. 7) |                     |                       |        |
|                                        |       |                                      |               |               |                         |                     |                       |        |
|                                        |       |                                      | 6.00          | 7.00          | 8.00                    | 9.00                | 10.00                 |        |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                      |               |               |                         |                     |                       |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                  | 254,687,726   |               | 254,687,726             |                     |                       | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT         | 78,386,521    |               | 78,386,521              |                     |                       | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT          | 79,550,791    |               | 79,550,791              |                     |                       | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT        | 22,177,645    |               | 22,177,645              |                     |                       | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT        | 62,624,888    |               | 62,624,888              |                     |                       | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                    | 16,288,765    |               | 16,288,765              |                     |                       | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                    | 21,358,190    |               | 21,358,190              |                     |                       | 41.00  |
| 43.00                                  | 04300 | NURSERY                              | 5,247,495     |               | 5,247,495               |                     |                       | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                      |               |               |                         |                     |                       |        |
| 50.00                                  | 05000 | OPERATING ROOM                       | 245,661,516   | 142,946,066   | 388,607,582             | 0.173255            | 0.000000              | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                        | 19,276,134    | 17,868,433    | 37,144,567              | 0.337600            | 0.000000              | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM           | 23,263,986    | 3,523,224     | 26,787,210              | 0.484486            | 0.000000              | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                       | 65,454,350    | 40,294,072    | 105,748,422             | 0.171493            | 0.000000              | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                 | 164,632,224   | 167,326,723   | 331,958,947             | 0.160259            | 0.000000              | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                | 5,219,533     | 98,999,210    | 104,218,743             | 0.162422            | 0.000000              | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                         | 4,651,397     | 22,326,196    | 26,977,593              | 0.241412            | 0.000000              | 56.00  |
| 60.00                                  | 06000 | LABORATORY                           | 225,309,885   | 279,852,283   | 505,162,168             | 0.196646            | 0.000000              | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                     | 340,739       | 5,006,116     | 5,346,855               | 0.427124            | 0.000000              | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  | 0             | 0             | 0                       | 0.000000            | 0.000000              | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 39,526,062    | 12,250,627    | 51,776,689              | 0.287573            | 0.000000              | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                  | 39,266,905    | 3,161,671     | 42,428,576              | 0.038832            | 0.000000              | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                  | 46,160,760    | 1,056,910     | 47,217,670              | 0.330032            | 0.000000              | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                     | 19,791,436    | 10,381,611    | 30,173,047              | 0.278895            | 0.000000              | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                 | 17,246,416    | 3,428,694     | 20,675,110              | 0.314565            | 0.000000              | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                     | 7,795,292     | 4,519,623     | 12,314,915              | 0.374815            | 0.000000              | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                    | 58,932,565    | 55,573,877    | 114,506,442             | 0.134504            | 0.000000              | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY               | 17,625,870    | 3,932,577     | 21,558,447              | 0.149488            | 0.000000              | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 81,820,757    | 37,387,041    | 119,207,798             | 0.355115            | 0.000000              | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 193,962,615   | 64,998,614    | 258,961,229             | 0.357513            | 0.000000              | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS            | 239,291,260   | 503,643,018   | 742,934,278             | 0.272594            | 0.000000              | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                       | 0             | 0             | 0                       | 0.000000            | 0.000000              | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                 | 13,870,724    | 323,249       | 14,193,973              | 0.388756            | 0.000000              | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                   | 503           | 537,790       | 538,293                 | 13.202466           | 0.000000              | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                      |               |               |                         |                     |                       |        |
| 90.00                                  | 09000 | CLINIC                               | 1,176,349     | 267,524,697   | 268,701,046             | 0.421807            | 0.000000              | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                            | 50,053,175    | 121,661,507   | 171,714,682             | 0.227437            | 0.000000              | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 0             | 13,762,720    | 13,762,720              | 0.555909            | 0.000000              | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0             | 0             | 0                       | 0.000000            | 0.000000              | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                    | 0             | 0             | 0                       | 0.000000            | 0.000000              | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                      |               |               |                         |                     |                       |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                | 0             | 0             | 0                       | 0.000000            | 0.000000              | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0             | 0             | 0                       | 0.000000            | 0.000000              | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM         | 0             | 0             | 0                       |                     |                       | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                      |               |               |                         |                     |                       |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                   | 14,129,000    | 0             | 14,129,000              |                     |                       | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                    | 0             | 0             | 0                       |                     |                       | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                    | 2,790,000     | 0             | 2,790,000               |                     |                       | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                     | 0             | 0             | 0                       |                     |                       | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                 | 425,000       | 0             | 425,000                 |                     |                       | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)    | 0             | 0             | 0                       |                     |                       | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF             |               |               |                         |                     |                       | 114.00 |
| 200.00                                 |       | Subtotal (see instructions)          | 2,137,996,474 | 1,882,286,549 | 4,020,283,023           |                     |                       | 200.00 |
| 201.00                                 |       | Less Observation Beds                |               |               |                         |                     |                       | 201.00 |
| 202.00                                 |       | Total (see instructions)             | 2,137,996,474 | 1,882,286,549 | 4,020,283,023           |                     |                       | 202.00 |

## COMPUTATION OF RATIO OF COSTS TO CHARGES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet C  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                |       |                                      | PPS Inpatient<br>Ratio | Title XIX | Hospital |        |
|----------------------------------------|-------|--------------------------------------|------------------------|-----------|----------|--------|
|                                        |       |                                      | 11.00                  |           |          |        |
| INPATIENT ROUTINE SERVICE COST CENTERS |       |                                      |                        |           |          |        |
| 30.00                                  | 03000 | ADULTS & PEDIATRICS                  |                        |           |          | 30.00  |
| 34.00                                  | 03400 | SURGICAL INTENSIVE CARE UNIT         |                        |           |          | 34.00  |
| 35.00                                  | 02040 | MEDICAL INTENSIVE CARE UNIT          |                        |           |          | 35.00  |
| 35.01                                  | 02080 | PEDIATRIC INTENSIVE CARE UNIT        |                        |           |          | 35.01  |
| 35.02                                  | 02120 | PREMATURE INTENSIVE CARE UNIT        |                        |           |          | 35.02  |
| 40.00                                  | 04000 | SUBPROVIDER - IPF                    |                        |           |          | 40.00  |
| 41.00                                  | 04100 | SUBPROVIDER - IRF                    |                        |           |          | 41.00  |
| 43.00                                  | 04300 | NURSERY                              |                        |           |          | 43.00  |
| ANCILLARY SERVICE COST CENTERS         |       |                                      |                        |           |          |        |
| 50.00                                  | 05000 | OPERATING ROOM                       | 0.000000               |           |          | 50.00  |
| 51.00                                  | 05100 | RECOVERY ROOM                        | 0.000000               |           |          | 51.00  |
| 52.00                                  | 05200 | DELIVERY ROOM & LABOR ROOM           | 0.000000               |           |          | 52.00  |
| 53.00                                  | 05300 | ANESTHESIOLOGY                       | 0.000000               |           |          | 53.00  |
| 54.00                                  | 05400 | RADIOLOGY-DIAGNOSTIC                 | 0.000000               |           |          | 54.00  |
| 55.00                                  | 05500 | RADIOLOGY-THERAPEUTIC                | 0.000000               |           |          | 55.00  |
| 56.00                                  | 05600 | RADIOISOTOPE                         | 0.000000               |           |          | 56.00  |
| 60.00                                  | 06000 | LABORATORY                           | 0.000000               |           |          | 60.00  |
| 60.01                                  | 06002 | LABORATORY - HLA                     | 0.000000               |           |          | 60.01  |
| 61.00                                  | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  | 0.000000               |           |          | 61.00  |
| 62.00                                  | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 0.000000               |           |          | 62.00  |
| 64.00                                  | 06400 | INTRAVENOUS THERAPY                  | 0.000000               |           |          | 64.00  |
| 65.00                                  | 06500 | RESPIRATORY THERAPY                  | 0.000000               |           |          | 65.00  |
| 66.00                                  | 06600 | PHYSICAL THERAPY                     | 0.000000               |           |          | 66.00  |
| 67.00                                  | 06700 | OCCUPATIONAL THERAPY                 | 0.000000               |           |          | 67.00  |
| 68.00                                  | 06800 | SPEECH PATHOLOGY                     | 0.000000               |           |          | 68.00  |
| 69.00                                  | 06900 | ELECTROCARDIOLOGY                    | 0.000000               |           |          | 69.00  |
| 70.00                                  | 07000 | ELECTROENCEPHALOGRAPHY               | 0.000000               |           |          | 70.00  |
| 71.00                                  | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 0.000000               |           |          | 71.00  |
| 72.00                                  | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 0.000000               |           |          | 72.00  |
| 73.00                                  | 07300 | DRUGS CHARGED TO PATIENTS            | 0.000000               |           |          | 73.00  |
| 74.00                                  | 07400 | RENAL DIALYSIS                       | 0.000000               |           |          | 74.00  |
| 76.00                                  | 03020 | RENAL DIALYSIS ADULT                 | 0.000000               |           |          | 76.00  |
| 76.01                                  | 03550 | PSYCH DAY HOSPITAL                   | 0.000000               |           |          | 76.01  |
| OUTPATIENT SERVICE COST CENTERS        |       |                                      |                        |           |          |        |
| 90.00                                  | 09000 | CLINIC                               | 0.000000               |           |          | 90.00  |
| 91.00                                  | 09100 | EMERGENCY                            | 0.000000               |           |          | 91.00  |
| 92.00                                  | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 0.000000               |           |          | 92.00  |
| 92.01                                  | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0.000000               |           |          | 92.01  |
| 93.00                                  | 04040 | BEHAVIORAL HEALTH                    | 0.000000               |           |          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS        |       |                                      |                        |           |          |        |
| 94.00                                  | 09400 | HOME PROGRAM DIALYSIS                | 0.000000               |           |          | 94.00  |
| 98.00                                  | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0.000000               |           |          | 98.00  |
| 100.00                                 | 10000 | I&R SERVICES-NOT APPRVD PRGM         |                        |           |          | 100.00 |
| SPECIAL PURPOSE COST CENTERS           |       |                                      |                        |           |          |        |
| 105.00                                 | 10500 | KIDNEY ACQUISITION                   |                        |           |          | 105.00 |
| 106.00                                 | 10600 | HEART ACQUISITION                    |                        |           |          | 106.00 |
| 107.00                                 | 10700 | LIVER ACQUISITION                    |                        |           |          | 107.00 |
| 108.00                                 | 10800 | LUNG ACQUISITION                     |                        |           |          | 108.00 |
| 109.00                                 | 10900 | PANCREAS ACQUISITION                 |                        |           |          | 109.00 |
| 112.00                                 | 08600 | OTHER ORGAN ACQUISITION (SPECIFY)    |                        |           |          | 112.00 |
| 114.00                                 | 11400 | UTILIZATION REVIEW - SNF             |                        |           |          | 114.00 |
| 200.00                                 |       | Subtotal (see instructions)          |                        |           |          | 200.00 |
| 201.00                                 |       | Less Observation Beds                |                        |           |          | 201.00 |
| 202.00                                 |       | Total (see instructions)             |                        |           |          | 202.00 |

## APPORTIONMENT OF INPATIENT ROUTINE SERVICE CAPITAL COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet D  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                        |                               |                                                                   | Title XVIII                                                  |                                                            | Hospital              | PPS                           |        |        |
|----------------------------------------|-------------------------------|-------------------------------------------------------------------|--------------------------------------------------------------|------------------------------------------------------------|-----------------------|-------------------------------|--------|--------|
| Cost Center Description                |                               | Capital<br>Related Cost<br>(from Wkst. B,<br>Part II, col.<br>26) | Swing Bed<br>Adjustment                                      | Reduced<br>Capital<br>Related Cost<br>(col. 1 - col.<br>2) | Total Patient<br>Days | Per Diem (col.<br>3 / col. 4) |        |        |
|                                        |                               | 1.00                                                              | 2.00                                                         | 3.00                                                       | 4.00                  | 5.00                          |        |        |
| INPATIENT ROUTINE SERVICE COST CENTERS |                               |                                                                   |                                                              |                                                            |                       |                               |        |        |
| 30.00                                  | ADULTS & PEDIATRICS           | 14,257,790                                                        | 0                                                            | 14,257,790                                                 | 111,934               | 127.38                        | 30.00  |        |
| 34.00                                  | SURGICAL INTENSIVE CARE UNIT  | 2,569,765                                                         |                                                              | 2,569,765                                                  | 16,585                | 154.95                        | 34.00  |        |
| 35.00                                  | MEDICAL INTENSIVE CARE UNIT   | 2,638,047                                                         |                                                              | 2,638,047                                                  | 17,456                | 151.13                        | 35.00  |        |
| 35.01                                  | PEDIATRIC INTENSIVE CARE UNIT | 754,887                                                           |                                                              | 754,887                                                    | 4,555                 | 165.73                        | 35.01  |        |
| 35.02                                  | PREMATURE INTENSIVE CARE UNIT | 2,207,542                                                         |                                                              | 2,207,542                                                  | 15,751                | 140.15                        | 35.02  |        |
| 40.00                                  | SUBPROVIDER - IPF             | 1,285,848                                                         | 0                                                            | 1,285,848                                                  | 7,008                 | 183.48                        | 40.00  |        |
| 41.00                                  | SUBPROVIDER - IRF             | 945,728                                                           | 0                                                            | 945,728                                                    | 9,226                 | 102.51                        | 41.00  |        |
| 43.00                                  | NURSERY                       | 774,168                                                           |                                                              | 774,168                                                    | 3,708                 | 208.78                        | 43.00  |        |
| 200.00                                 | Total (lines 30 through 199)  | 25,433,775                                                        |                                                              | 25,433,775                                                 | 186,223               |                               | 200.00 |        |
| Cost Center Description                |                               | Inpatient<br>Program days                                         | Inpatient<br>Program<br>Capital Cost<br>(col. 5 x col.<br>6) |                                                            |                       |                               |        |        |
|                                        |                               | 6.00                                                              | 7.00                                                         |                                                            |                       |                               |        |        |
| INPATIENT ROUTINE SERVICE COST CENTERS |                               |                                                                   |                                                              |                                                            |                       |                               |        |        |
| 30.00                                  | ADULTS & PEDIATRICS           | 36,361                                                            | 4,631,664                                                    |                                                            |                       |                               |        | 30.00  |
| 34.00                                  | SURGICAL INTENSIVE CARE UNIT  | 5,315                                                             | 823,559                                                      |                                                            |                       |                               |        | 34.00  |
| 35.00                                  | MEDICAL INTENSIVE CARE UNIT   | 7,465                                                             | 1,128,185                                                    |                                                            |                       |                               |        | 35.00  |
| 35.01                                  | PEDIATRIC INTENSIVE CARE UNIT | 4                                                                 | 663                                                          |                                                            |                       |                               |        | 35.01  |
| 35.02                                  | PREMATURE INTENSIVE CARE UNIT | 0                                                                 | 0                                                            |                                                            |                       |                               |        | 35.02  |
| 40.00                                  | SUBPROVIDER - IPF             | 1,714                                                             | 314,485                                                      |                                                            |                       |                               |        | 40.00  |
| 41.00                                  | SUBPROVIDER - IRF             | 3,805                                                             | 390,051                                                      |                                                            |                       |                               |        | 41.00  |
| 43.00                                  | NURSERY                       | 0                                                                 | 0                                                            |                                                            |                       |                               |        | 43.00  |
| 200.00                                 | Total (lines 30 through 199)  | 54,664                                                            | 7,288,607                                                    |                                                            |                       |                               |        | 200.00 |

## APPORTIONMENT OF INPATIENT ANCILLARY SERVICE CAPITAL COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet D  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                 |       |                                      | Title XVIII                                                       |                                                       | Hospital                                            | PPS                             |                                           |        |
|---------------------------------|-------|--------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------|---------------------------------|-------------------------------------------|--------|
| Cost Center Description         |       |                                      | Capital<br>Related Cost<br>(from Wkst. B,<br>Part II, col.<br>26) | Total Charges<br>(from Wkst. C,<br>Part I, col.<br>8) | Ratio of Cost<br>to Charges<br>(col. 1 ÷ col.<br>2) | Inpatient<br>Program<br>Charges | Capital Costs<br>(column 3 x<br>column 4) |        |
|                                 |       |                                      | 1.00                                                              | 2.00                                                  | 3.00                                                | 4.00                            | 5.00                                      |        |
| ANCILLARY SERVICE COST CENTERS  |       |                                      |                                                                   |                                                       |                                                     |                                 |                                           |        |
| 50.00                           | 05000 | OPERATING ROOM                       | 7,016,329                                                         | 388,607,582                                           | 0.018055                                            | 73,900,793                      | 1,334,279                                 | 50.00  |
| 51.00                           | 05100 | RECOVERY ROOM                        | 1,634,704                                                         | 37,144,567                                            | 0.044009                                            | 8,287,207                       | 364,712                                   | 51.00  |
| 52.00                           | 05200 | DELIVERY ROOM & LABOR ROOM           | 1,232,449                                                         | 26,787,210                                            | 0.046009                                            | 186,184                         | 8,566                                     | 52.00  |
| 53.00                           | 05300 | ANESTHESIOLOGY                       | 929,801                                                           | 105,748,422                                           | 0.008793                                            | 21,423,947                      | 188,381                                   | 53.00  |
| 54.00                           | 05400 | RADIOLOGY-DIAGNOSTIC                 | 4,329,270                                                         | 331,958,947                                           | 0.013042                                            | 55,936,133                      | 729,519                                   | 54.00  |
| 55.00                           | 05500 | RADIOLOGY-THERAPEUTIC                | 1,254,373                                                         | 104,218,743                                           | 0.012036                                            | 1,459,143                       | 17,562                                    | 55.00  |
| 56.00                           | 05600 | RADIOISOTOPE                         | 353,697                                                           | 26,977,593                                            | 0.013111                                            | 2,029,612                       | 26,610                                    | 56.00  |
| 60.00                           | 06000 | LABORATORY                           | 5,739,724                                                         | 505,162,168                                           | 0.011362                                            | 69,920,947                      | 794,442                                   | 60.00  |
| 60.01                           | 06002 | LABORATORY - HLA                     | 77,742                                                            | 5,346,855                                             | 0.014540                                            | 82,257                          | 1,196                                     | 60.01  |
| 61.00                           | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  |                                                                   |                                                       |                                                     |                                 |                                           | 61.00  |
| 62.00                           | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 332,265                                                           | 51,776,689                                            | 0.006417                                            | 11,239,036                      | 72,121                                    | 62.00  |
| 64.00                           | 06400 | INTRAVENOUS THERAPY                  | 47,052                                                            | 42,428,576                                            | 0.001109                                            | 11,889,525                      | 13,185                                    | 64.00  |
| 65.00                           | 06500 | RESPIRATORY THERAPY                  | 454,390                                                           | 47,217,670                                            | 0.009623                                            | 10,814,956                      | 104,072                                   | 65.00  |
| 66.00                           | 06600 | PHYSICAL THERAPY                     | 542,923                                                           | 30,173,047                                            | 0.017994                                            | 5,530,374                       | 99,514                                    | 66.00  |
| 67.00                           | 06700 | OCCUPATIONAL THERAPY                 | 459,388                                                           | 20,675,110                                            | 0.022219                                            | 4,564,718                       | 101,423                                   | 67.00  |
| 68.00                           | 06800 | SPEECH PATHOLOGY                     | 267,533                                                           | 12,314,915                                            | 0.021724                                            | 2,034,047                       | 44,188                                    | 68.00  |
| 69.00                           | 06900 | ELECTROCARDIOLOGY                    | 1,042,551                                                         | 114,506,442                                           | 0.009105                                            | 20,627,327                      | 187,812                                   | 69.00  |
| 70.00                           | 07000 | ELECTROENCEPHALOGRAPHY               | 161,971                                                           | 21,558,447                                            | 0.007513                                            | 4,521,429                       | 33,969                                    | 70.00  |
| 71.00                           | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 194,381                                                           | 119,207,798                                           | 0.001631                                            | 28,017,489                      | 45,697                                    | 71.00  |
| 72.00                           | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 410,924                                                           | 258,961,229                                           | 0.001587                                            | 79,182,352                      | 125,662                                   | 72.00  |
| 73.00                           | 07300 | DRUGS CHARGED TO PATIENTS            | 1,645,659                                                         | 742,934,278                                           | 0.002215                                            | 64,607,216                      | 143,105                                   | 73.00  |
| 74.00                           | 07400 | RENAL DIALYSIS                       | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 74.00  |
| 76.00                           | 03020 | RENAL DIALYSIS ADULT                 | 124,680                                                           | 14,193,973                                            | 0.008784                                            | 6,278,092                       | 55,147                                    | 76.00  |
| 76.01                           | 03550 | PSYCH DAY HOSPITAL                   | 381,427                                                           | 538,293                                               | 0.708586                                            | 0                               | 0                                         | 76.01  |
| OUTPATIENT SERVICE COST CENTERS |       |                                      |                                                                   |                                                       |                                                     |                                 |                                           |        |
| 90.00                           | 09000 | CLINIC                               | 5,253,854                                                         | 268,701,046                                           | 0.019553                                            | 575,746                         | 11,258                                    | 90.00  |
| 91.00                           | 09100 | EMERGENCY                            | 3,113,237                                                         | 171,714,682                                           | 0.018130                                            | 16,921,528                      | 306,787                                   | 91.00  |
| 92.00                           | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 746,942                                                           | 13,762,720                                            | 0.054273                                            | 0                               | 0                                         | 92.00  |
| 92.01                           | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 92.01  |
| 93.00                           | 04040 | BEHAVIORAL HEALTH                    | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS |       |                                      |                                                                   |                                                       |                                                     |                                 |                                           |        |
| 94.00                           | 09400 | HOME PROGRAM DIALYSIS                | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 94.00  |
| 98.00                           | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 98.00  |
| 200.00                          |       | Total (lines 50 through 199)         | 37,747,266                                                        | 3,462,617,002                                         |                                                     | 500,030,058                     | 4,809,207                                 | 200.00 |

|                                                                     |       |                               |           |           |                                                                   |                                                               |                                               |                               |                                                                      |  |  |
|---------------------------------------------------------------------|-------|-------------------------------|-----------|-----------|-------------------------------------------------------------------|---------------------------------------------------------------|-----------------------------------------------|-------------------------------|----------------------------------------------------------------------|--|--|
| APPORTIONMENT OF INPATIENT ROUTINE SERVICE OTHER PASS THROUGH COSTS |       |                               |           |           | Provider CCN: 14-0119                                             |                                                               | Period:<br>From 07/01/2018<br>To 06/30/2019   |                               | Worksheet D<br>Part III<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |  |  |
|                                                                     |       |                               |           |           | Title XVIII                                                       |                                                               | Hospital                                      |                               | PPS                                                                  |  |  |
| Cost Center Description                                             |       |                               |           |           | Nursing School<br>Post-Stepdown<br>Adjustments                    | Nursing School                                                | Allied Health<br>Post-Stepdown<br>Adjustments | Allied Health<br>Cost         | All Other<br>Medical<br>Education Cost                               |  |  |
|                                                                     |       |                               |           |           | 1A                                                                | 1.00                                                          | 2A                                            | 2.00                          | 3.00                                                                 |  |  |
| INPATIENT ROUTINE SERVICE COST CENTERS                              |       |                               |           |           |                                                                   |                                                               |                                               |                               |                                                                      |  |  |
| 30.00                                                               | 03000 | ADULTS & PEDIATRICS           | 0         | 6,375,282 | 0                                                                 | 402,932                                                       | 0                                             | 30.00                         |                                                                      |  |  |
| 34.00                                                               | 03400 | SURGICAL INTENSIVE CARE UNIT  | 0         | 15,732    | 0                                                                 | 95,467                                                        | 0                                             | 34.00                         |                                                                      |  |  |
| 35.00                                                               | 02040 | MEDICAL INTENSIVE CARE UNIT   | 0         | 0         | 0                                                                 | 108,696                                                       | 0                                             | 35.00                         |                                                                      |  |  |
| 35.01                                                               | 02080 | PEDIATRIC INTENSIVE CARE UNIT | 0         | 0         | 0                                                                 | 31,912                                                        | 0                                             | 35.01                         |                                                                      |  |  |
| 35.02                                                               | 02120 | PREMATURE INTENSIVE CARE UNIT | 0         | 357,640   | 0                                                                 | 70,387                                                        | 0                                             | 35.02                         |                                                                      |  |  |
| 40.00                                                               | 04000 | SUBPROVIDER - IPF             | 0         | 662,140   | 0                                                                 | 31,548                                                        | 0                                             | 40.00                         |                                                                      |  |  |
| 41.00                                                               | 04100 | SUBPROVIDER - IRF             | 0         | 325,826   | 0                                                                 | 29,523                                                        | 0                                             | 41.00                         |                                                                      |  |  |
| 43.00                                                               | 04300 | NURSERY                       | 0         | 0         | 0                                                                 | 0                                                             | 0                                             | 43.00                         |                                                                      |  |  |
| 200.00                                                              |       | Total (lines 30 through 199)  | 0         | 7,736,620 | 0                                                                 | 770,465                                                       | 0                                             | 200.00                        |                                                                      |  |  |
| Cost Center Description                                             |       |                               |           |           | Swing-Bed<br>Adjustment<br>Amount (see<br>instructions)           | Total Costs<br>(sum of cols.<br>1 through 3,<br>minus col. 4) | Total Patient<br>Days                         | Per Diem (col.<br>5 ÷ col. 6) | Inpatient<br>Program Days                                            |  |  |
|                                                                     |       |                               |           |           | 4.00                                                              | 5.00                                                          | 6.00                                          | 7.00                          | 8.00                                                                 |  |  |
| INPATIENT ROUTINE SERVICE COST CENTERS                              |       |                               |           |           |                                                                   |                                                               |                                               |                               |                                                                      |  |  |
| 30.00                                                               | 03000 | ADULTS & PEDIATRICS           | 0         | 6,778,214 | 111,934                                                           | 60.56                                                         | 36,361                                        | 30.00                         |                                                                      |  |  |
| 34.00                                                               | 03400 | SURGICAL INTENSIVE CARE UNIT  | 0         | 111,199   | 16,585                                                            | 6.70                                                          | 5,315                                         | 34.00                         |                                                                      |  |  |
| 35.00                                                               | 02040 | MEDICAL INTENSIVE CARE UNIT   | 0         | 108,696   | 17,456                                                            | 6.23                                                          | 7,465                                         | 35.00                         |                                                                      |  |  |
| 35.01                                                               | 02080 | PEDIATRIC INTENSIVE CARE UNIT | 0         | 31,912    | 4,555                                                             | 7.01                                                          | 4                                             | 35.01                         |                                                                      |  |  |
| 35.02                                                               | 02120 | PREMATURE INTENSIVE CARE UNIT | 0         | 428,027   | 15,751                                                            | 27.17                                                         | 0                                             | 35.02                         |                                                                      |  |  |
| 40.00                                                               | 04000 | SUBPROVIDER - IPF             | 0         | 693,688   | 7,008                                                             | 98.99                                                         | 1,714                                         | 40.00                         |                                                                      |  |  |
| 41.00                                                               | 04100 | SUBPROVIDER - IRF             | 0         | 355,349   | 9,226                                                             | 38.52                                                         | 3,805                                         | 41.00                         |                                                                      |  |  |
| 43.00                                                               | 04300 | NURSERY                       | 0         | 0         | 3,708                                                             | 0.00                                                          | 0                                             | 43.00                         |                                                                      |  |  |
| 200.00                                                              |       | Total (lines 30 through 199)  | 0         | 8,507,085 | 186,223                                                           |                                                               | 54,664                                        | 200.00                        |                                                                      |  |  |
| Cost Center Description                                             |       |                               |           |           | Inpatient<br>Program<br>Pass-Through<br>Cost (col. 7 x<br>col. 8) |                                                               |                                               |                               |                                                                      |  |  |
|                                                                     |       |                               |           |           | 9.00                                                              |                                                               |                                               |                               |                                                                      |  |  |
| INPATIENT ROUTINE SERVICE COST CENTERS                              |       |                               |           |           |                                                                   |                                                               |                                               |                               |                                                                      |  |  |
| 30.00                                                               | 03000 | ADULTS & PEDIATRICS           | 2,202,022 |           |                                                                   |                                                               |                                               | 30.00                         |                                                                      |  |  |
| 34.00                                                               | 03400 | SURGICAL INTENSIVE CARE UNIT  | 35,611    |           |                                                                   |                                                               |                                               | 34.00                         |                                                                      |  |  |
| 35.00                                                               | 02040 | MEDICAL INTENSIVE CARE UNIT   | 46,507    |           |                                                                   |                                                               |                                               | 35.00                         |                                                                      |  |  |
| 35.01                                                               | 02080 | PEDIATRIC INTENSIVE CARE UNIT | 28        |           |                                                                   |                                                               |                                               | 35.01                         |                                                                      |  |  |
| 35.02                                                               | 02120 | PREMATURE INTENSIVE CARE UNIT | 0         |           |                                                                   |                                                               |                                               | 35.02                         |                                                                      |  |  |
| 40.00                                                               | 04000 | SUBPROVIDER - IPF             | 169,669   |           |                                                                   |                                                               |                                               | 40.00                         |                                                                      |  |  |
| 41.00                                                               | 04100 | SUBPROVIDER - IRF             | 146,569   |           |                                                                   |                                                               |                                               | 41.00                         |                                                                      |  |  |
| 43.00                                                               | 04300 | NURSERY                       | 0         |           |                                                                   |                                                               |                                               | 43.00                         |                                                                      |  |  |
| 200.00                                                              |       | Total (lines 30 through 199)  | 2,600,406 |           |                                                                   |                                                               |                                               | 200.00                        |                                                                      |  |  |

| APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS |       |                                      |  | Provider CCN: 14-0119                |                                                | Period:<br>From 07/01/2018<br>To 06/30/2019 |                                               | Worksheet D<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |        |
|----------------------------------------------------------------------------------|-------|--------------------------------------|--|--------------------------------------|------------------------------------------------|---------------------------------------------|-----------------------------------------------|---------------------------------------------------------------------|--------|
|                                                                                  |       |                                      |  | Title XVIII                          |                                                | Hospital                                    |                                               | PPS                                                                 |        |
| Cost Center Description                                                          |       |                                      |  | Non Physician<br>Anesthetist<br>Cost | Nursing School<br>Post-Stepdown<br>Adjustments | Nursing School                              | Allied Health<br>Post-Stepdown<br>Adjustments | Allied Health                                                       |        |
|                                                                                  |       |                                      |  | 1.00                                 | 2A                                             | 2.00                                        | 3A                                            | 3.00                                                                |        |
| ANCILLARY SERVICE COST CENTERS                                                   |       |                                      |  |                                      |                                                |                                             |                                               |                                                                     |        |
| 50.00                                                                            | 05000 | OPERATING ROOM                       |  | 0                                    | 0                                              | 0                                           | 0                                             | 491,223                                                             | 50.00  |
| 51.00                                                                            | 05100 | RECOVERY ROOM                        |  | 0                                    | 0                                              | 0                                           | 0                                             | 34,926                                                              | 51.00  |
| 52.00                                                                            | 05200 | DELIVERY ROOM & LABOR ROOM           |  | 0                                    | 0                                              | 0                                           | 0                                             | 35,055                                                              | 52.00  |
| 53.00                                                                            | 05300 | ANESTHESIOLOGY                       |  | 0                                    | 0                                              | 671,230                                     | 0                                             | 42,821                                                              | 53.00  |
| 54.00                                                                            | 05400 | RADIOLOGY-DIAGNOSTIC                 |  | 0                                    | 0                                              | 0                                           | 0                                             | 409,771                                                             | 54.00  |
| 55.00                                                                            | 05500 | RADIOLOGY-THERAPEUTIC                |  | 0                                    | 0                                              | 0                                           | 0                                             | 306,297                                                             | 55.00  |
| 56.00                                                                            | 05600 | RADIOISOTOPE                         |  | 0                                    | 0                                              | 0                                           | 0                                             | 16,940                                                              | 56.00  |
| 60.00                                                                            | 06000 | LABORATORY                           |  | 0                                    | 0                                              | 0                                           | 0                                             | 682,482                                                             | 60.00  |
| 60.01                                                                            | 06002 | LABORATORY - HLA                     |  | 0                                    | 0                                              | 0                                           | 0                                             | 7,441                                                               | 60.01  |
| 61.00                                                                            | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  |  | 0                                    | 0                                              | 0                                           | 0                                             |                                                                     | 61.00  |
| 62.00                                                                            | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS |  | 0                                    | 0                                              | 0                                           | 0                                             | 45,797                                                              | 62.00  |
| 64.00                                                                            | 06400 | INTRAVENOUS THERAPY                  |  | 0                                    | 0                                              | 0                                           | 0                                             | 5                                                                   | 64.00  |
| 65.00                                                                            | 06500 | RESPIRATORY THERAPY                  |  | 0                                    | 0                                              | 0                                           | 0                                             | 608,291                                                             | 65.00  |
| 66.00                                                                            | 06600 | PHYSICAL THERAPY                     |  | 0                                    | 0                                              | 0                                           | 0                                             | 26,025                                                              | 66.00  |
| 67.00                                                                            | 06700 | OCCUPATIONAL THERAPY                 |  | 0                                    | 0                                              | 0                                           | 0                                             | 130,754                                                             | 67.00  |
| 68.00                                                                            | 06800 | SPEECH PATHOLOGY                     |  | 0                                    | 0                                              | 0                                           | 0                                             | 14,948                                                              | 68.00  |
| 69.00                                                                            | 06900 | ELECTROCARDIOLOGY                    |  | 0                                    | 0                                              | 0                                           | 0                                             | 104,767                                                             | 69.00  |
| 70.00                                                                            | 07000 | ELECTROENCEPHALOGRAPHY               |  | 0                                    | 0                                              | 0                                           | 0                                             | 7,351                                                               | 70.00  |
| 71.00                                                                            | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS |  | 0                                    | 0                                              | 0                                           | 0                                             | 0                                                                   | 71.00  |
| 72.00                                                                            | 07200 | IMPL. DEV. CHARGED TO PATIENTS       |  | 0                                    | 0                                              | 0                                           | 0                                             | 0                                                                   | 72.00  |
| 73.00                                                                            | 07300 | DRUGS CHARGED TO PATIENTS            |  | 0                                    | 0                                              | 0                                           | 0                                             | 1,017,024                                                           | 73.00  |
| 74.00                                                                            | 07400 | RENAL DIALYSIS                       |  | 0                                    | 0                                              | 0                                           | 0                                             | 0                                                                   | 74.00  |
| 76.00                                                                            | 03020 | RENAL DIALYSIS ADULT                 |  | 0                                    | 0                                              | 0                                           | 0                                             | 13,454                                                              | 76.00  |
| 76.01                                                                            | 03550 | PSYCH DAY HOSPITAL                   |  | 0                                    | 0                                              | 0                                           | 0                                             | 16,644                                                              | 76.01  |
| OUTPATIENT SERVICE COST CENTERS                                                  |       |                                      |  |                                      |                                                |                                             |                                               |                                                                     |        |
| 90.00                                                                            | 09000 | CLINIC                               |  | 0                                    | 0                                              | 0                                           | 0                                             | 328,102                                                             | 90.00  |
| 91.00                                                                            | 09100 | EMERGENCY                            |  | 0                                    | 0                                              | 0                                           | 0                                             | 75,355                                                              | 91.00  |
| 92.00                                                                            | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) |  | 0                                    | 0                                              | 333,989                                     | 0                                             | 21,109                                                              | 92.00  |
| 92.01                                                                            | 09201 | OBSERVATION BEDS (DISTINCT PART)     |  | 0                                    | 0                                              | 0                                           | 0                                             | 0                                                                   | 92.01  |
| 93.00                                                                            | 04040 | BEHAVIORAL HEALTH                    |  | 0                                    | 0                                              | 0                                           | 0                                             | 0                                                                   | 93.00  |
| OTHER REIMBURSABLE COST CENTERS                                                  |       |                                      |  |                                      |                                                |                                             |                                               |                                                                     |        |
| 94.00                                                                            | 09400 | HOME PROGRAM DIALYSIS                |  | 0                                    | 0                                              | 0                                           | 0                                             | 0                                                                   | 94.00  |
| 98.00                                                                            | 09850 | OTHER REIMBURSABLE COST CENTERS      |  | 0                                    | 0                                              | 0                                           | 0                                             | 0                                                                   | 98.00  |
| 200.00                                                                           |       | Total (lines 50 through 199)         |  | 0                                    | 0                                              | 1,005,219                                   | 0                                             | 4,436,582                                                           | 200.00 |

APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS  
THROUGH COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet D  
Part IV  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                         |                                 |                                      |                                  | Title XVIII                              |                                                  | Hospital                                     | PPS                                        |        |
|-------------------------|---------------------------------|--------------------------------------|----------------------------------|------------------------------------------|--------------------------------------------------|----------------------------------------------|--------------------------------------------|--------|
| Cost Center Description |                                 |                                      | All Other Medical Education Cost | Total Cost (sum of cols. 1, 2, 3, and 4) | Total Outpatient Cost (sum of cols. 2, 3, and 4) | Total Charges (from Wkst. C, Part I, col. 8) | Ratio of Cost to Charges (col. 5 ÷ col. 7) |        |
|                         |                                 |                                      | 4.00                             | 5.00                                     | 6.00                                             | 7.00                                         | 8.00                                       |        |
|                         | ANCILLARY SERVICE COST CENTERS  |                                      |                                  |                                          |                                                  |                                              |                                            |        |
| 50.00                   | 05000                           | OPERATING ROOM                       | 0                                | 491,223                                  | 491,223                                          | 388,607,582                                  | 0.001264                                   | 50.00  |
| 51.00                   | 05100                           | RECOVERY ROOM                        | 0                                | 34,926                                   | 34,926                                           | 37,144,567                                   | 0.000940                                   | 51.00  |
| 52.00                   | 05200                           | DELIVERY ROOM & LABOR ROOM           | 0                                | 35,055                                   | 35,055                                           | 26,787,210                                   | 0.001309                                   | 52.00  |
| 53.00                   | 05300                           | ANESTHESIOLOGY                       | 0                                | 714,051                                  | 714,051                                          | 105,748,422                                  | 0.006752                                   | 53.00  |
| 54.00                   | 05400                           | RADIOLOGY-DIAGNOSTIC                 | 0                                | 409,771                                  | 409,771                                          | 331,958,947                                  | 0.001234                                   | 54.00  |
| 55.00                   | 05500                           | RADIOLOGY-THERAPEUTIC                | 0                                | 306,297                                  | 306,297                                          | 104,218,743                                  | 0.002939                                   | 55.00  |
| 56.00                   | 05600                           | RADIOISOTOPE                         | 0                                | 16,940                                   | 16,940                                           | 26,977,593                                   | 0.000628                                   | 56.00  |
| 60.00                   | 06000                           | LABORATORY                           | 0                                | 682,482                                  | 682,482                                          | 505,162,168                                  | 0.001351                                   | 60.00  |
| 60.01                   | 06002                           | LABORATORY - HLA                     | 0                                | 7,441                                    | 7,441                                            | 5,346,855                                    | 0.001392                                   | 60.01  |
| 61.00                   | 06100                           | PBP CLINICAL LAB SERVICES-PRGM ONLY  |                                  |                                          |                                                  |                                              |                                            | 61.00  |
| 62.00                   | 06200                           | WHOLE BLOOD & PACKED RED BLOOD CELLS | 0                                | 45,797                                   | 45,797                                           | 51,776,689                                   | 0.000885                                   | 62.00  |
| 64.00                   | 06400                           | INTRAVENOUS THERAPY                  | 0                                | 5                                        | 5                                                | 42,428,576                                   | 0.000000                                   | 64.00  |
| 65.00                   | 06500                           | RESPIRATORY THERAPY                  | 0                                | 608,291                                  | 608,291                                          | 47,217,670                                   | 0.012883                                   | 65.00  |
| 66.00                   | 06600                           | PHYSICAL THERAPY                     | 0                                | 26,025                                   | 26,025                                           | 30,173,047                                   | 0.000863                                   | 66.00  |
| 67.00                   | 06700                           | OCCUPATIONAL THERAPY                 | 0                                | 130,754                                  | 130,754                                          | 20,675,110                                   | 0.006324                                   | 67.00  |
| 68.00                   | 06800                           | SPEECH PATHOLOGY                     | 0                                | 14,948                                   | 14,948                                           | 12,314,915                                   | 0.001214                                   | 68.00  |
| 69.00                   | 06900                           | ELECTROCARDIOLOGY                    | 0                                | 104,767                                  | 104,767                                          | 114,506,442                                  | 0.000915                                   | 69.00  |
| 70.00                   | 07000                           | ELECTROENCEPHALOGRAPHY               | 0                                | 7,351                                    | 7,351                                            | 21,558,447                                   | 0.000341                                   | 70.00  |
| 71.00                   | 07100                           | MEDICAL SUPPLIES CHARGED TO PATIENTS | 0                                | 0                                        | 0                                                | 119,207,798                                  | 0.000000                                   | 71.00  |
| 72.00                   | 07200                           | IMPL. DEV. CHARGED TO PATIENTS       | 0                                | 0                                        | 0                                                | 258,961,229                                  | 0.000000                                   | 72.00  |
| 73.00                   | 07300                           | DRUGS CHARGED TO PATIENTS            | 0                                | 1,017,024                                | 1,017,024                                        | 742,934,278                                  | 0.001369                                   | 73.00  |
| 74.00                   | 07400                           | RENAL DIALYSIS                       | 0                                | 0                                        | 0                                                | 0                                            | 0.000000                                   | 74.00  |
| 76.00                   | 03020                           | RENAL DIALYSIS ADULT                 | 0                                | 13,454                                   | 13,454                                           | 14,193,973                                   | 0.000948                                   | 76.00  |
| 76.01                   | 03550                           | PSYCH DAY HOSPITAL                   | 0                                | 16,644                                   | 16,644                                           | 538,293                                      | 0.030920                                   | 76.01  |
|                         | OUTPATIENT SERVICE COST CENTERS |                                      |                                  |                                          |                                                  |                                              |                                            |        |
| 90.00                   | 09000                           | CLINIC                               | 0                                | 328,102                                  | 328,102                                          | 268,701,046                                  | 0.001221                                   | 90.00  |
| 91.00                   | 09100                           | EMERGENCY                            | 0                                | 75,355                                   | 75,355                                           | 171,714,682                                  | 0.000439                                   | 91.00  |
| 92.00                   | 09200                           | OBSERVATION BEDS (NON-DISTINCT PART) | 0                                | 355,098                                  | 355,098                                          | 13,762,720                                   | 0.025801                                   | 92.00  |
| 92.01                   | 09201                           | OBSERVATION BEDS (DISTINCT PART)     | 0                                | 0                                        | 0                                                | 0                                            | 0.000000                                   | 92.01  |
| 93.00                   | 04040                           | BEHAVIORAL HEALTH                    | 0                                | 0                                        | 0                                                | 0                                            | 0.000000                                   | 93.00  |
|                         | OTHER REIMBURSABLE COST CENTERS |                                      |                                  |                                          |                                                  |                                              |                                            |        |
| 94.00                   | 09400                           | HOME PROGRAM DIALYSIS                | 0                                | 0                                        | 0                                                | 0                                            | 0.000000                                   | 94.00  |
| 98.00                   | 09850                           | OTHER REIMBURSABLE COST CENTERS      | 0                                | 0                                        | 0                                                | 0                                            | 0.000000                                   | 98.00  |
| 200.00                  |                                 | Total (lines 50 through 199)         | 0                                | 5,441,801                                | 5,441,801                                        | 3,462,617,002                                |                                            | 200.00 |

APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet D  
Part IV  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description         |       | Title XVIII                                           |                           |                                                         | Hospital                                               |                                                          | PPS |        |
|---------------------------------|-------|-------------------------------------------------------|---------------------------|---------------------------------------------------------|--------------------------------------------------------|----------------------------------------------------------|-----|--------|
|                                 |       | Outpatient Ratio of Cost to Charges (col. 6 ÷ col. 7) | Inpatient Program Charges | Inpatient Program Pass-Through Costs (col. 8 x col. 10) | Outpatient Program Charges before Geo Reclassification | Outpatient Program Charges on/after Geo Reclassification |     |        |
|                                 |       | 9.00                                                  | 10.00                     | 11.00                                                   | 12.00                                                  | 12.01                                                    |     |        |
| ANCILLARY SERVICE COST CENTERS  |       |                                                       |                           |                                                         |                                                        |                                                          |     |        |
| 50.00                           | 05000 | OPERATING ROOM                                        | 0.001264                  | 73,900,793                                              | 93,411                                                 | 28,863,859                                               | 0   | 50.00  |
| 51.00                           | 05100 | RECOVERY ROOM                                         | 0.000940                  | 8,287,207                                               | 7,790                                                  | 7,626,083                                                | 0   | 51.00  |
| 52.00                           | 05200 | DELIVERY ROOM & LABOR ROOM                            | 0.001309                  | 186,184                                                 | 244                                                    | 27,110                                                   | 0   | 52.00  |
| 53.00                           | 05300 | ANESTHESIOLOGY                                        | 0.006752                  | 21,423,947                                              | 144,654                                                | 8,924,481                                                | 0   | 53.00  |
| 54.00                           | 05400 | RADIOLOGY-DIAGNOSTIC                                  | 0.001234                  | 55,936,133                                              | 69,025                                                 | 49,817,320                                               | 0   | 54.00  |
| 55.00                           | 05500 | RADIOLOGY-THERAPEUTIC                                 | 0.002939                  | 1,459,143                                               | 4,288                                                  | 34,505,913                                               | 0   | 55.00  |
| 56.00                           | 05600 | RADIOISOTOPE                                          | 0.000628                  | 2,029,612                                               | 1,275                                                  | 10,240,167                                               | 0   | 56.00  |
| 60.00                           | 06000 | LABORATORY                                            | 0.001351                  | 69,920,947                                              | 94,463                                                 | 77,379,721                                               | 0   | 60.00  |
| 60.01                           | 06002 | LABORATORY - HLA                                      | 0.001392                  | 82,257                                                  | 115                                                    | 2,611,693                                                | 0   | 60.01  |
| 61.00                           | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY                   |                           |                                                         |                                                        |                                                          |     | 61.00  |
| 62.00                           | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS                  | 0.000885                  | 11,239,036                                              | 9,947                                                  | 3,804,573                                                | 0   | 62.00  |
| 64.00                           | 06400 | INTRAVENOUS THERAPY                                   | 0.000000                  | 11,889,525                                              | 0                                                      | 1,133,459                                                | 0   | 64.00  |
| 65.00                           | 06500 | RESPIRATORY THERAPY                                   | 0.012883                  | 10,814,956                                              | 139,329                                                | 131,831                                                  | 0   | 65.00  |
| 66.00                           | 06600 | PHYSICAL THERAPY                                      | 0.000863                  | 5,530,374                                               | 4,773                                                  | 2,386,940                                                | 0   | 66.00  |
| 67.00                           | 06700 | OCCUPATIONAL THERAPY                                  | 0.006324                  | 4,564,718                                               | 28,867                                                 | 904,597                                                  | 0   | 67.00  |
| 68.00                           | 06800 | SPEECH PATHOLOGY                                      | 0.001214                  | 2,034,047                                               | 2,469                                                  | 877,333                                                  | 0   | 68.00  |
| 69.00                           | 06900 | ELECTROCARDIOLOGY                                     | 0.000915                  | 20,627,327                                              | 18,874                                                 | 18,381,069                                               | 0   | 69.00  |
| 70.00                           | 07000 | ELECTROENCEPHALOGRAPHY                                | 0.000341                  | 4,521,429                                               | 1,542                                                  | 326,661                                                  | 0   | 70.00  |
| 71.00                           | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS                  | 0.000000                  | 28,017,489                                              | 0                                                      | 11,543,765                                               | 0   | 71.00  |
| 72.00                           | 07200 | IMPL. DEV. CHARGED TO PATIENTS                        | 0.000000                  | 79,182,352                                              | 0                                                      | 22,372,838                                               | 0   | 72.00  |
| 73.00                           | 07300 | DRUGS CHARGED TO PATIENTS                             | 0.001369                  | 64,607,216                                              | 88,447                                                 | 141,396,246                                              | 0   | 73.00  |
| 74.00                           | 07400 | RENAL DIALYSIS                                        | 0.000000                  | 0                                                       | 0                                                      | 0                                                        | 0   | 74.00  |
| 76.00                           | 03020 | RENAL DIALYSIS ADULT                                  | 0.000948                  | 6,278,092                                               | 5,952                                                  | 185,621                                                  | 0   | 76.00  |
| 76.01                           | 03550 | PSYCH DAY HOSPITAL                                    | 0.030920                  | 0                                                       | 0                                                      | 184,985                                                  | 0   | 76.01  |
| OUTPATIENT SERVICE COST CENTERS |       |                                                       |                           |                                                         |                                                        |                                                          |     |        |
| 90.00                           | 09000 | CLINIC                                                | 0.001221                  | 575,746                                                 | 703                                                    | 73,207,134                                               | 0   | 90.00  |
| 91.00                           | 09100 | EMERGENCY                                             | 0.000439                  | 16,921,528                                              | 7,429                                                  | 16,450,687                                               | 0   | 91.00  |
| 92.00                           | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)                  | 0.025801                  | 0                                                       | 0                                                      | 2,516,015                                                | 0   | 92.00  |
| 92.01                           | 09201 | OBSERVATION BEDS (DISTINCT PART)                      | 0.000000                  | 0                                                       | 0                                                      | 0                                                        | 0   | 92.01  |
| 93.00                           | 04040 | BEHAVIORAL HEALTH                                     | 0.000000                  | 0                                                       | 0                                                      | 0                                                        | 0   | 93.00  |
| OTHER REIMBURSABLE COST CENTERS |       |                                                       |                           |                                                         |                                                        |                                                          |     |        |
| 94.00                           | 09400 | HOME PROGRAM DIALYSIS                                 | 0.000000                  | 0                                                       | 0                                                      | 0                                                        | 0   | 94.00  |
| 98.00                           | 09850 | OTHER REIMBURSABLE COST CENTERS                       | 0.000000                  | 0                                                       | 0                                                      | 0                                                        | 0   | 98.00  |
| 200.00                          |       | Total (lines 50 through 199)                          |                           | 500,030,058                                             | 723,597                                                | 515,800,101                                              | 0   | 200.00 |

| APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS |       |                                      |  | Provider CCN: 14-0119                                                                                        |                                                                                                                | Period:<br>From 07/01/2018<br>To 06/30/2019 |  | Worksheet D<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |        |  |
|----------------------------------------------------------------------------------|-------|--------------------------------------|--|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|---------------------------------------------|--|---------------------------------------------------------------------|--------|--|
|                                                                                  |       |                                      |  | Title XVIII                                                                                                  |                                                                                                                | Hospital                                    |  | PPS                                                                 |        |  |
| Cost Center Description                                                          |       |                                      |  | Outpatient<br>Program<br>Pass-Through<br>Costs (col. 9<br>x col. 12)<br>before Geo<br>Reclassification<br>on | Outpatient<br>Program<br>Pass-Through<br>Costs (col. 9<br>x col. 12)<br>on/after Geo<br>Reclassification<br>on |                                             |  |                                                                     |        |  |
|                                                                                  |       |                                      |  | 13.00                                                                                                        | 13.01                                                                                                          |                                             |  |                                                                     |        |  |
| ANCILLARY SERVICE COST CENTERS                                                   |       |                                      |  |                                                                                                              |                                                                                                                |                                             |  |                                                                     |        |  |
| 50.00                                                                            | 05000 | OPERATING ROOM                       |  | 36,484                                                                                                       | 0                                                                                                              |                                             |  |                                                                     | 50.00  |  |
| 51.00                                                                            | 05100 | RECOVERY ROOM                        |  | 7,169                                                                                                        | 0                                                                                                              |                                             |  |                                                                     | 51.00  |  |
| 52.00                                                                            | 05200 | DELIVERY ROOM & LABOR ROOM           |  | 35                                                                                                           | 0                                                                                                              |                                             |  |                                                                     | 52.00  |  |
| 53.00                                                                            | 05300 | ANESTHESIOLOGY                       |  | 60,258                                                                                                       | 0                                                                                                              |                                             |  |                                                                     | 53.00  |  |
| 54.00                                                                            | 05400 | RADIOLOGY-DIAGNOSTIC                 |  | 61,475                                                                                                       | 0                                                                                                              |                                             |  |                                                                     | 54.00  |  |
| 55.00                                                                            | 05500 | RADIOLOGY-THERAPEUTIC                |  | 101,413                                                                                                      | 0                                                                                                              |                                             |  |                                                                     | 55.00  |  |
| 56.00                                                                            | 05600 | RADIOISOTOPE                         |  | 6,431                                                                                                        | 0                                                                                                              |                                             |  |                                                                     | 56.00  |  |
| 60.00                                                                            | 06000 | LABORATORY                           |  | 104,540                                                                                                      | 0                                                                                                              |                                             |  |                                                                     | 60.00  |  |
| 60.01                                                                            | 06002 | LABORATORY - HLA                     |  | 3,635                                                                                                        | 0                                                                                                              |                                             |  |                                                                     | 60.01  |  |
| 61.00                                                                            | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  |  |                                                                                                              |                                                                                                                |                                             |  |                                                                     | 61.00  |  |
| 62.00                                                                            | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS |  | 3,367                                                                                                        | 0                                                                                                              |                                             |  |                                                                     | 62.00  |  |
| 64.00                                                                            | 06400 | INTRAVENOUS THERAPY                  |  | 0                                                                                                            | 0                                                                                                              |                                             |  |                                                                     | 64.00  |  |
| 65.00                                                                            | 06500 | RESPIRATORY THERAPY                  |  | 1,698                                                                                                        | 0                                                                                                              |                                             |  |                                                                     | 65.00  |  |
| 66.00                                                                            | 06600 | PHYSICAL THERAPY                     |  | 2,060                                                                                                        | 0                                                                                                              |                                             |  |                                                                     | 66.00  |  |
| 67.00                                                                            | 06700 | OCCUPATIONAL THERAPY                 |  | 5,721                                                                                                        | 0                                                                                                              |                                             |  |                                                                     | 67.00  |  |
| 68.00                                                                            | 06800 | SPEECH PATHOLOGY                     |  | 1,065                                                                                                        | 0                                                                                                              |                                             |  |                                                                     | 68.00  |  |
| 69.00                                                                            | 06900 | ELECTROCARDIOLOGY                    |  | 16,819                                                                                                       | 0                                                                                                              |                                             |  |                                                                     | 69.00  |  |
| 70.00                                                                            | 07000 | ELECTROENCEPHALOGRAPHY               |  | 111                                                                                                          | 0                                                                                                              |                                             |  |                                                                     | 70.00  |  |
| 71.00                                                                            | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS |  | 0                                                                                                            | 0                                                                                                              |                                             |  |                                                                     | 71.00  |  |
| 72.00                                                                            | 07200 | IMPL. DEV. CHARGED TO PATIENTS       |  | 0                                                                                                            | 0                                                                                                              |                                             |  |                                                                     | 72.00  |  |
| 73.00                                                                            | 07300 | DRUGS CHARGED TO PATIENTS            |  | 193,571                                                                                                      | 0                                                                                                              |                                             |  |                                                                     | 73.00  |  |
| 74.00                                                                            | 07400 | RENAL DIALYSIS                       |  | 0                                                                                                            | 0                                                                                                              |                                             |  |                                                                     | 74.00  |  |
| 76.00                                                                            | 03020 | RENAL DIALYSIS ADULT                 |  | 176                                                                                                          | 0                                                                                                              |                                             |  |                                                                     | 76.00  |  |
| 76.01                                                                            | 03550 | PSYCH DAY HOSPITAL                   |  | 5,720                                                                                                        | 0                                                                                                              |                                             |  |                                                                     | 76.01  |  |
| OUTPATIENT SERVICE COST CENTERS                                                  |       |                                      |  |                                                                                                              |                                                                                                                |                                             |  |                                                                     |        |  |
| 90.00                                                                            | 09000 | CLINIC                               |  | 89,386                                                                                                       | 0                                                                                                              |                                             |  |                                                                     | 90.00  |  |
| 91.00                                                                            | 09100 | EMERGENCY                            |  | 7,222                                                                                                        | 0                                                                                                              |                                             |  |                                                                     | 91.00  |  |
| 92.00                                                                            | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) |  | 64,916                                                                                                       | 0                                                                                                              |                                             |  |                                                                     | 92.00  |  |
| 92.01                                                                            | 09201 | OBSERVATION BEDS (DISTINCT PART)     |  | 0                                                                                                            | 0                                                                                                              |                                             |  |                                                                     | 92.01  |  |
| 93.00                                                                            | 04040 | BEHAVIORAL HEALTH                    |  | 0                                                                                                            | 0                                                                                                              |                                             |  |                                                                     | 93.00  |  |
| OTHER REIMBURSABLE COST CENTERS                                                  |       |                                      |  |                                                                                                              |                                                                                                                |                                             |  |                                                                     |        |  |
| 94.00                                                                            | 09400 | HOME PROGRAM DIALYSIS                |  | 0                                                                                                            | 0                                                                                                              |                                             |  |                                                                     | 94.00  |  |
| 98.00                                                                            | 09850 | OTHER REIMBURSABLE COST CENTERS      |  | 0                                                                                                            | 0                                                                                                              |                                             |  |                                                                     | 98.00  |  |
| 200.00                                                                           |       | Total (lines 50 through 199)         |  | 773,272                                                                                                      | 0                                                                                                              |                                             |  |                                                                     | 200.00 |  |

APPORTIONMENT OF MEDICAL, OTHER HEALTH SERVICES AND VACCINE COST

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet D  
Part V  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                 |       |                                                    | Title XVIII                                                    |                                           | Hospital                                                                     |                                                                                  | PPS                         |        |
|---------------------------------|-------|----------------------------------------------------|----------------------------------------------------------------|-------------------------------------------|------------------------------------------------------------------------------|----------------------------------------------------------------------------------|-----------------------------|--------|
| Cost Center Description         |       |                                                    | Cost to Charge<br>Ratio From<br>Worksheet C,<br>Part I, col. 9 | Charges                                   |                                                                              | Costs                                                                            |                             |        |
|                                 |       |                                                    |                                                                | PPS Reimbursed<br>Services (see<br>inst.) | Cost<br>Reimbursed<br>Services<br>Subject To<br>Ded. & Coins.<br>(see inst.) | Cost<br>Reimbursed<br>Services Not<br>Subject To<br>Ded. & Coins.<br>(see inst.) | PPS Services<br>(see inst.) |        |
|                                 |       |                                                    |                                                                |                                           |                                                                              |                                                                                  |                             |        |
|                                 |       |                                                    | 1.00                                                           | 2.00                                      | 3.00                                                                         | 4.00                                                                             | 5.00                        |        |
| ANCILLARY SERVICE COST CENTERS  |       |                                                    |                                                                |                                           |                                                                              |                                                                                  |                             |        |
| 50.00                           | 05000 | OPERATING ROOM                                     | 0.158579                                                       | 28,863,859                                | 0                                                                            | 0                                                                                | 4,577,202                   | 50.00  |
| 51.00                           | 05100 | RECOVERY ROOM                                      | 0.337600                                                       | 7,626,083                                 | 0                                                                            | 0                                                                                | 2,574,566                   | 51.00  |
| 52.00                           | 05200 | DELIVERY ROOM & LABOR ROOM                         | 0.456278                                                       | 27,110                                    | 0                                                                            | 0                                                                                | 12,370                      | 52.00  |
| 53.00                           | 05300 | ANESTHESIOLOGY                                     | 0.121538                                                       | 8,924,481                                 | 0                                                                            | 0                                                                                | 1,084,664                   | 53.00  |
| 54.00                           | 05400 | RADIOLOGY-DIAGNOSTIC                               | 0.139555                                                       | 49,817,320                                | 0                                                                            | 0                                                                                | 6,952,256                   | 54.00  |
| 55.00                           | 05500 | RADIOLOGY-THERAPEUTIC                              | 0.152729                                                       | 34,505,913                                | 0                                                                            | 0                                                                                | 5,270,054                   | 55.00  |
| 56.00                           | 05600 | RADIOISOTOPE                                       | 0.213038                                                       | 10,240,167                                | 0                                                                            | 0                                                                                | 2,181,545                   | 56.00  |
| 60.00                           | 06000 | LABORATORY                                         | 0.191336                                                       | 77,379,721                                | 0                                                                            | 0                                                                                | 14,805,526                  | 60.00  |
| 60.01                           | 06002 | LABORATORY - HLA                                   | 0.427124                                                       | 2,611,693                                 | 0                                                                            | 0                                                                                | 1,115,517                   | 60.01  |
| 61.00                           | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY                | 0.000000                                                       |                                           | 0                                                                            | 0                                                                                |                             | 61.00  |
| 62.00                           | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS               | 0.282719                                                       | 3,804,573                                 | 0                                                                            | 0                                                                                | 1,075,625                   | 62.00  |
| 64.00                           | 06400 | INTRAVENOUS THERAPY                                | 0.038832                                                       | 1,133,459                                 | 0                                                                            | 0                                                                                | 44,014                      | 64.00  |
| 65.00                           | 06500 | RESPIRATORY THERAPY                                | 0.316917                                                       | 131,831                                   | 0                                                                            | 0                                                                                | 41,779                      | 65.00  |
| 66.00                           | 06600 | PHYSICAL THERAPY                                   | 0.278895                                                       | 2,386,940                                 | 0                                                                            | 0                                                                                | 665,706                     | 66.00  |
| 67.00                           | 06700 | OCCUPATIONAL THERAPY                               | 0.314565                                                       | 904,597                                   | 0                                                                            | 0                                                                                | 284,555                     | 67.00  |
| 68.00                           | 06800 | SPEECH PATHOLOGY                                   | 0.374815                                                       | 877,333                                   | 0                                                                            | 0                                                                                | 328,838                     | 68.00  |
| 69.00                           | 06900 | ELECTROCARDIOLOGY                                  | 0.125452                                                       | 18,381,069                                | 0                                                                            | 0                                                                                | 2,305,942                   | 69.00  |
| 70.00                           | 07000 | ELECTROENCEPHALOGRAPHY                             | 0.149488                                                       | 326,661                                   | 0                                                                            | 0                                                                                | 48,832                      | 70.00  |
| 71.00                           | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS               | 0.355115                                                       | 11,543,765                                | 0                                                                            | 0                                                                                | 4,099,364                   | 71.00  |
| 72.00                           | 07200 | IMPL. DEV. CHARGED TO PATIENTS                     | 0.357513                                                       | 22,372,838                                | 543,453                                                                      | 0                                                                                | 7,998,580                   | 72.00  |
| 73.00                           | 07300 | DRUGS CHARGED TO PATIENTS                          | 0.272594                                                       | 141,396,246                               | 474,431                                                                      | 0                                                                                | 38,543,768                  | 73.00  |
| 74.00                           | 07400 | RENAL DIALYSIS                                     | 0.000000                                                       | 0                                         | 0                                                                            | 0                                                                                | 0                           | 74.00  |
| 76.00                           | 03020 | RENAL DIALYSIS ADULT                               | 0.306590                                                       | 185,621                                   | 0                                                                            | 0                                                                                | 56,910                      | 76.00  |
| 76.01                           | 03550 | PSYCH DAY HOSPITAL                                 | 8.722772                                                       | 184,985                                   | 0                                                                            | 0                                                                                | 1,613,582                   | 76.01  |
| OUTPATIENT SERVICE COST CENTERS |       |                                                    |                                                                |                                           |                                                                              |                                                                                  |                             |        |
| 90.00                           | 09000 | CLINIC                                             | 0.386418                                                       | 73,207,134                                | 0                                                                            | 0                                                                                | 28,288,554                  | 90.00  |
| 91.00                           | 09100 | EMERGENCY                                          | 0.201332                                                       | 16,450,687                                | 0                                                                            | 0                                                                                | 3,312,050                   | 91.00  |
| 92.00                           | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)               | 0.555909                                                       | 2,516,015                                 | 0                                                                            | 0                                                                                | 1,398,675                   | 92.00  |
| 92.01                           | 09201 | OBSERVATION BEDS (DISTINCT PART)                   | 0.000000                                                       | 0                                         | 0                                                                            | 0                                                                                | 0                           | 92.01  |
| 93.00                           | 04040 | BEHAVIORAL HEALTH                                  | 0.000000                                                       | 0                                         | 0                                                                            | 0                                                                                | 0                           | 93.00  |
| OTHER REIMBURSABLE COST CENTERS |       |                                                    |                                                                |                                           |                                                                              |                                                                                  |                             |        |
| 94.00                           | 09400 | HOME PROGRAM DIALYSIS                              | 0.000000                                                       |                                           | 0                                                                            | 0                                                                                |                             | 94.00  |
| 98.00                           | 09850 | OTHER REIMBURSABLE COST CENTERS                    | 0.000000                                                       | 0                                         | 0                                                                            | 0                                                                                | 0                           | 98.00  |
| 200.00                          |       | Subtotal (see instructions)                        |                                                                | 515,800,101                               | 1,017,884                                                                    | 0                                                                                | 128,680,474                 | 200.00 |
| 201.00                          |       | Less PBP Clinic Lab. Services-Program Only Charges |                                                                |                                           | 0                                                                            | 0                                                                                |                             | 201.00 |
| 202.00                          |       | Net Charges (line 200 - line 201)                  |                                                                | 515,800,101                               | 1,017,884                                                                    | 0                                                                                | 128,680,474                 | 202.00 |

APPORTIONMENT OF MEDICAL, OTHER HEALTH SERVICES AND VACCINE COST

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet D  
Part V  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                         |                                 |                                                    | Title XVIII                                                   |                                                                   | Hospital | PPS    |
|-------------------------|---------------------------------|----------------------------------------------------|---------------------------------------------------------------|-------------------------------------------------------------------|----------|--------|
| Cost Center Description |                                 |                                                    | Costs                                                         |                                                                   |          |        |
|                         |                                 |                                                    | Cost Reimbursed Services Subject To Ded. & Coins. (see inst.) | Cost Reimbursed Services Not Subject To Ded. & Coins. (see inst.) |          |        |
|                         |                                 |                                                    | 6.00                                                          | 7.00                                                              |          |        |
|                         | ANCILLARY SERVICE COST CENTERS  |                                                    |                                                               |                                                                   |          |        |
| 50.00                   | 05000                           | OPERATING ROOM                                     | 0                                                             | 0                                                                 |          | 50.00  |
| 51.00                   | 05100                           | RECOVERY ROOM                                      | 0                                                             | 0                                                                 |          | 51.00  |
| 52.00                   | 05200                           | DELIVERY ROOM & LABOR ROOM                         | 0                                                             | 0                                                                 |          | 52.00  |
| 53.00                   | 05300                           | ANESTHESIOLOGY                                     | 0                                                             | 0                                                                 |          | 53.00  |
| 54.00                   | 05400                           | RADIOLOGY-DIAGNOSTIC                               | 0                                                             | 0                                                                 |          | 54.00  |
| 55.00                   | 05500                           | RADIOLOGY-THERAPEUTIC                              | 0                                                             | 0                                                                 |          | 55.00  |
| 56.00                   | 05600                           | RADIOISOTOPE                                       | 0                                                             | 0                                                                 |          | 56.00  |
| 60.00                   | 06000                           | LABORATORY                                         | 0                                                             | 0                                                                 |          | 60.00  |
| 60.01                   | 06002                           | LABORATORY - HLA                                   | 0                                                             | 0                                                                 |          | 60.01  |
| 61.00                   | 06100                           | PBP CLINICAL LAB SERVICES-PRGM ONLY                | 0                                                             |                                                                   |          | 61.00  |
| 62.00                   | 06200                           | WHOLE BLOOD & PACKED RED BLOOD CELLS               | 0                                                             | 0                                                                 |          | 62.00  |
| 64.00                   | 06400                           | INTRAVENOUS THERAPY                                | 0                                                             | 0                                                                 |          | 64.00  |
| 65.00                   | 06500                           | RESPIRATORY THERAPY                                | 0                                                             | 0                                                                 |          | 65.00  |
| 66.00                   | 06600                           | PHYSICAL THERAPY                                   | 0                                                             | 0                                                                 |          | 66.00  |
| 67.00                   | 06700                           | OCCUPATIONAL THERAPY                               | 0                                                             | 0                                                                 |          | 67.00  |
| 68.00                   | 06800                           | SPEECH PATHOLOGY                                   | 0                                                             | 0                                                                 |          | 68.00  |
| 69.00                   | 06900                           | ELECTROCARDIOLOGY                                  | 0                                                             | 0                                                                 |          | 69.00  |
| 70.00                   | 07000                           | ELECTROENCEPHALOGRAPHY                             | 0                                                             | 0                                                                 |          | 70.00  |
| 71.00                   | 07100                           | MEDICAL SUPPLIES CHARGED TO PATIENTS               | 0                                                             | 0                                                                 |          | 71.00  |
| 72.00                   | 07200                           | IMPL. DEV. CHARGED TO PATIENTS                     | 194,292                                                       | 0                                                                 |          | 72.00  |
| 73.00                   | 07300                           | DRUGS CHARGED TO PATIENTS                          | 129,327                                                       | 0                                                                 |          | 73.00  |
| 74.00                   | 07400                           | RENAL DIALYSIS                                     | 0                                                             | 0                                                                 |          | 74.00  |
| 76.00                   | 03020                           | RENAL DIALYSIS ADULT                               | 0                                                             | 0                                                                 |          | 76.00  |
| 76.01                   | 03550                           | PSYCH DAY HOSPITAL                                 | 0                                                             | 0                                                                 |          | 76.01  |
|                         | OUTPATIENT SERVICE COST CENTERS |                                                    |                                                               |                                                                   |          |        |
| 90.00                   | 09000                           | CLINIC                                             | 0                                                             | 0                                                                 |          | 90.00  |
| 91.00                   | 09100                           | EMERGENCY                                          | 0                                                             | 0                                                                 |          | 91.00  |
| 92.00                   | 09200                           | OBSERVATION BEDS (NON-DISTINCT PART)               | 0                                                             | 0                                                                 |          | 92.00  |
| 92.01                   | 09201                           | OBSERVATION BEDS (DISTINCT PART)                   | 0                                                             | 0                                                                 |          | 92.01  |
| 93.00                   | 04040                           | BEHAVIORAL HEALTH                                  | 0                                                             | 0                                                                 |          | 93.00  |
|                         | OTHER REIMBURSABLE COST CENTERS |                                                    |                                                               |                                                                   |          |        |
| 94.00                   | 09400                           | HOME PROGRAM DIALYSIS                              | 0                                                             | 0                                                                 |          | 94.00  |
| 98.00                   | 09850                           | OTHER REIMBURSABLE COST CENTERS                    | 0                                                             | 0                                                                 |          | 98.00  |
| 200.00                  |                                 | Subtotal (see instructions)                        | 323,619                                                       | 0                                                                 |          | 200.00 |
| 201.00                  |                                 | Less PBP Clinic Lab. Services-Program Only Charges | 0                                                             |                                                                   |          | 201.00 |
| 202.00                  |                                 | Net Charges (line 200 - line 201)                  | 323,619                                                       | 0                                                                 |          | 202.00 |

## APPORTIONMENT OF INPATIENT ANCILLARY SERVICE CAPITAL COSTS

Provider CCN: 14-0119

Period:

Worksheet D

Component CCN: 14-S119

From 07/01/2018  
To 06/30/2019Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

Title XVIII

Subprovider -

PPS

| Cost Center Description         |       |                                      | Capital<br>Related Cost<br>(from Wkst. B,<br>Part II, col.<br>26) | Total Charges<br>(from Wkst. C,<br>Part I, col.<br>8) | Ratio of Cost<br>to Charges<br>(col. 1 ÷ col.<br>2) | Inpatient<br>Program<br>Charges | Capital Costs<br>(column 3 x<br>column 4) |        |
|---------------------------------|-------|--------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------|---------------------------------|-------------------------------------------|--------|
|                                 |       |                                      | 1.00                                                              | 2.00                                                  | 3.00                                                | 4.00                            | 5.00                                      |        |
| ANCILLARY SERVICE COST CENTERS  |       |                                      |                                                                   |                                                       |                                                     |                                 |                                           |        |
| 50.00                           | 05000 | OPERATING ROOM                       | 7,016,329                                                         | 388,607,582                                           | 0.018055                                            | 0                               | 0                                         | 50.00  |
| 51.00                           | 05100 | RECOVERY ROOM                        | 1,634,704                                                         | 37,144,567                                            | 0.044009                                            | 239,050                         | 10,520                                    | 51.00  |
| 52.00                           | 05200 | DELIVERY ROOM & LABOR ROOM           | 1,232,449                                                         | 26,787,210                                            | 0.046009                                            | 0                               | 0                                         | 52.00  |
| 53.00                           | 05300 | ANESTHESIOLOGY                       | 929,801                                                           | 105,748,422                                           | 0.008793                                            | 0                               | 0                                         | 53.00  |
| 54.00                           | 05400 | RADIOLOGY-DIAGNOSTIC                 | 4,329,270                                                         | 331,958,947                                           | 0.013042                                            | 139,622                         | 1,821                                     | 54.00  |
| 55.00                           | 05500 | RADIOLOGY-THERAPEUTIC                | 1,254,373                                                         | 104,218,743                                           | 0.012036                                            | 0                               | 0                                         | 55.00  |
| 56.00                           | 05600 | RADIOISOTOPE                         | 353,697                                                           | 26,977,593                                            | 0.013111                                            | 0                               | 0                                         | 56.00  |
| 60.00                           | 06000 | LABORATORY                           | 5,739,724                                                         | 505,162,168                                           | 0.011362                                            | 382,510                         | 4,346                                     | 60.00  |
| 60.01                           | 06002 | LABORATORY - HLA                     | 77,742                                                            | 5,346,855                                             | 0.014540                                            | 0                               | 0                                         | 60.01  |
| 61.00                           | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  |                                                                   |                                                       |                                                     |                                 |                                           | 61.00  |
| 62.00                           | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 332,265                                                           | 51,776,689                                            | 0.006417                                            | 387                             | 2                                         | 62.00  |
| 64.00                           | 06400 | INTRAVENOUS THERAPY                  | 47,052                                                            | 42,428,576                                            | 0.001109                                            | 31,635                          | 35                                        | 64.00  |
| 65.00                           | 06500 | RESPIRATORY THERAPY                  | 454,390                                                           | 47,217,670                                            | 0.009623                                            | 21,750                          | 209                                       | 65.00  |
| 66.00                           | 06600 | PHYSICAL THERAPY                     | 542,923                                                           | 30,173,047                                            | 0.017994                                            | 13,260                          | 239                                       | 66.00  |
| 67.00                           | 06700 | OCCUPATIONAL THERAPY                 | 459,388                                                           | 20,675,110                                            | 0.022219                                            | 200,706                         | 4,459                                     | 67.00  |
| 68.00                           | 06800 | SPEECH PATHOLOGY                     | 267,533                                                           | 12,314,915                                            | 0.021724                                            | 7,922                           | 172                                       | 68.00  |
| 69.00                           | 06900 | ELECTROCARDIOLOGY                    | 1,042,551                                                         | 114,506,442                                           | 0.009105                                            | 55,266                          | 503                                       | 69.00  |
| 70.00                           | 07000 | ELECTROENCEPHALOGRAPHY               | 161,971                                                           | 21,558,447                                            | 0.007513                                            | 13,940                          | 105                                       | 70.00  |
| 71.00                           | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 194,381                                                           | 119,207,798                                           | 0.001631                                            | 0                               | 0                                         | 71.00  |
| 72.00                           | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 410,924                                                           | 258,961,229                                           | 0.001587                                            | 0                               | 0                                         | 72.00  |
| 73.00                           | 07300 | DRUGS CHARGED TO PATIENTS            | 1,645,659                                                         | 742,934,278                                           | 0.002215                                            | 441,194                         | 977                                       | 73.00  |
| 74.00                           | 07400 | RENAL DIALYSIS                       | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 74.00  |
| 76.00                           | 03020 | RENAL DIALYSIS ADULT                 | 124,680                                                           | 14,193,973                                            | 0.008784                                            | 0                               | 0                                         | 76.00  |
| 76.01                           | 03550 | PSYCH DAY HOSPITAL                   | 381,427                                                           | 538,293                                               | 0.708586                                            | 251                             | 178                                       | 76.01  |
| OUTPATIENT SERVICE COST CENTERS |       |                                      |                                                                   |                                                       |                                                     |                                 |                                           |        |
| 90.00                           | 09000 | CLINIC                               | 5,253,854                                                         | 268,701,046                                           | 0.019553                                            | 3,872                           | 76                                        | 90.00  |
| 91.00                           | 09100 | EMERGENCY                            | 3,113,237                                                         | 171,714,682                                           | 0.018130                                            | 327,718                         | 5,942                                     | 91.00  |
| 92.00                           | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 0                                                                 | 13,762,720                                            | 0.000000                                            | 0                               | 0                                         | 92.00  |
| 92.01                           | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 92.01  |
| 93.00                           | 04040 | BEHAVIORAL HEALTH                    | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS |       |                                      |                                                                   |                                                       |                                                     |                                 |                                           |        |
| 94.00                           | 09400 | HOME PROGRAM DIALYSIS                | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 94.00  |
| 98.00                           | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 98.00  |
| 200.00                          |       | Total (lines 50 through 199)         | 37,000,324                                                        | 3,462,617,002                                         |                                                     | 1,879,083                       | 29,584                                    | 200.00 |

| APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS |       |                                      |  | Provider CCN: 14-0119<br>Component CCN: 14-S119 |                                                | Period:<br>From 07/01/2018<br>To 06/30/2019 |                                               | Worksheet D<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |        |
|----------------------------------------------------------------------------------|-------|--------------------------------------|--|-------------------------------------------------|------------------------------------------------|---------------------------------------------|-----------------------------------------------|---------------------------------------------------------------------|--------|
|                                                                                  |       |                                      |  | Title XVIII                                     |                                                | Subprovider -<br>IPF                        |                                               | PPS                                                                 |        |
| Cost Center Description                                                          |       |                                      |  | Non Physician<br>Anesthetist<br>Cost            | Nursing School<br>Post-Stepdown<br>Adjustments | Nursing School                              | Allied Health<br>Post-Stepdown<br>Adjustments | Allied Health                                                       |        |
|                                                                                  |       |                                      |  | 1.00                                            | 2A                                             | 2.00                                        | 3A                                            | 3.00                                                                |        |
| ANCILLARY SERVICE COST CENTERS                                                   |       |                                      |  |                                                 |                                                |                                             |                                               |                                                                     |        |
| 50.00                                                                            | 05000 | OPERATING ROOM                       |  | 0                                               | 0                                              | 0                                           | 0                                             | 491,223                                                             | 50.00  |
| 51.00                                                                            | 05100 | RECOVERY ROOM                        |  | 0                                               | 0                                              | 0                                           | 0                                             | 34,926                                                              | 51.00  |
| 52.00                                                                            | 05200 | DELIVERY ROOM & LABOR ROOM           |  | 0                                               | 0                                              | 0                                           | 0                                             | 35,055                                                              | 52.00  |
| 53.00                                                                            | 05300 | ANESTHESIOLOGY                       |  | 0                                               | 0                                              | 671,230                                     | 0                                             | 42,821                                                              | 53.00  |
| 54.00                                                                            | 05400 | RADIOLOGY-DIAGNOSTIC                 |  | 0                                               | 0                                              | 0                                           | 0                                             | 409,771                                                             | 54.00  |
| 55.00                                                                            | 05500 | RADIOLOGY-THERAPEUTIC                |  | 0                                               | 0                                              | 0                                           | 0                                             | 306,297                                                             | 55.00  |
| 56.00                                                                            | 05600 | RADIOISOTOPE                         |  | 0                                               | 0                                              | 0                                           | 0                                             | 16,940                                                              | 56.00  |
| 60.00                                                                            | 06000 | LABORATORY                           |  | 0                                               | 0                                              | 0                                           | 0                                             | 682,482                                                             | 60.00  |
| 60.01                                                                            | 06002 | LABORATORY - HLA                     |  | 0                                               | 0                                              | 0                                           | 0                                             | 7,441                                                               | 60.01  |
| 61.00                                                                            | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  |  | 0                                               | 0                                              | 0                                           | 0                                             |                                                                     | 61.00  |
| 62.00                                                                            | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS |  | 0                                               | 0                                              | 0                                           | 0                                             | 45,797                                                              | 62.00  |
| 64.00                                                                            | 06400 | INTRAVENOUS THERAPY                  |  | 0                                               | 0                                              | 0                                           | 0                                             | 5                                                                   | 64.00  |
| 65.00                                                                            | 06500 | RESPIRATORY THERAPY                  |  | 0                                               | 0                                              | 0                                           | 0                                             | 608,291                                                             | 65.00  |
| 66.00                                                                            | 06600 | PHYSICAL THERAPY                     |  | 0                                               | 0                                              | 0                                           | 0                                             | 26,025                                                              | 66.00  |
| 67.00                                                                            | 06700 | OCCUPATIONAL THERAPY                 |  | 0                                               | 0                                              | 0                                           | 0                                             | 130,754                                                             | 67.00  |
| 68.00                                                                            | 06800 | SPEECH PATHOLOGY                     |  | 0                                               | 0                                              | 0                                           | 0                                             | 14,948                                                              | 68.00  |
| 69.00                                                                            | 06900 | ELECTROCARDIOLOGY                    |  | 0                                               | 0                                              | 0                                           | 0                                             | 104,767                                                             | 69.00  |
| 70.00                                                                            | 07000 | ELECTROENCEPHALOGRAPHY               |  | 0                                               | 0                                              | 0                                           | 0                                             | 7,351                                                               | 70.00  |
| 71.00                                                                            | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 71.00  |
| 72.00                                                                            | 07200 | IMPL. DEV. CHARGED TO PATIENTS       |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 72.00  |
| 73.00                                                                            | 07300 | DRUGS CHARGED TO PATIENTS            |  | 0                                               | 0                                              | 0                                           | 0                                             | 1,017,024                                                           | 73.00  |
| 74.00                                                                            | 07400 | RENAL DIALYSIS                       |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 74.00  |
| 76.00                                                                            | 03020 | RENAL DIALYSIS ADULT                 |  | 0                                               | 0                                              | 0                                           | 0                                             | 13,454                                                              | 76.00  |
| 76.01                                                                            | 03550 | PSYCH DAY HOSPITAL                   |  | 0                                               | 0                                              | 0                                           | 0                                             | 16,644                                                              | 76.01  |
| OUTPATIENT SERVICE COST CENTERS                                                  |       |                                      |  |                                                 |                                                |                                             |                                               |                                                                     |        |
| 90.00                                                                            | 09000 | CLINIC                               |  | 0                                               | 0                                              | 0                                           | 0                                             | 328,102                                                             | 90.00  |
| 91.00                                                                            | 09100 | EMERGENCY                            |  | 0                                               | 0                                              | 0                                           | 0                                             | 75,355                                                              | 91.00  |
| 92.00                                                                            | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 92.00  |
| 92.01                                                                            | 09201 | OBSERVATION BEDS (DISTINCT PART)     |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 92.01  |
| 93.00                                                                            | 04040 | BEHAVIORAL HEALTH                    |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 93.00  |
| OTHER REIMBURSABLE COST CENTERS                                                  |       |                                      |  |                                                 |                                                |                                             |                                               |                                                                     |        |
| 94.00                                                                            | 09400 | HOME PROGRAM DIALYSIS                |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 94.00  |
| 98.00                                                                            | 09850 | OTHER REIMBURSABLE COST CENTERS      |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 98.00  |
| 200.00                                                                           |       | Total (lines 50 through 199)         |  | 0                                               | 0                                              | 671,230                                     | 0                                             | 4,415,473                                                           | 200.00 |

| APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS |       |                                      |   | Provider CCN: 14-0119<br>Component CCN: 14-S119 |                                                   | Period:<br>From 07/01/2018<br>To 06/30/2019                  |                                                       | Worksheet D<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |        |
|----------------------------------------------------------------------------------|-------|--------------------------------------|---|-------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------|--------|
|                                                                                  |       |                                      |   | Title XVIII                                     |                                                   | Subprovider -<br>IPF                                         |                                                       | PPS                                                                 |        |
| Cost Center Description                                                          |       |                                      |   | All Other<br>Medical<br>Education Cost          | Total Cost<br>(sum of cols.<br>1, 2, 3, and<br>4) | Total<br>Outpatient<br>Cost (sum of<br>cols. 2, 3,<br>and 4) | Total Charges<br>(from Wkst. C,<br>Part I, col.<br>8) | Ratio of Cost<br>to Charges<br>(col. 5 ÷ col.<br>7)                 |        |
|                                                                                  |       |                                      |   | 4.00                                            | 5.00                                              | 6.00                                                         | 7.00                                                  | 8.00                                                                |        |
| ANCILLARY SERVICE COST CENTERS                                                   |       |                                      |   |                                                 |                                                   |                                                              |                                                       |                                                                     |        |
| 50.00                                                                            | 05000 | OPERATING ROOM                       | 0 |                                                 | 491,223                                           | 491,223                                                      | 388,607,582                                           | 0.001264                                                            | 50.00  |
| 51.00                                                                            | 05100 | RECOVERY ROOM                        | 0 |                                                 | 34,926                                            | 34,926                                                       | 37,144,567                                            | 0.000940                                                            | 51.00  |
| 52.00                                                                            | 05200 | DELIVERY ROOM & LABOR ROOM           | 0 |                                                 | 35,055                                            | 35,055                                                       | 26,787,210                                            | 0.001309                                                            | 52.00  |
| 53.00                                                                            | 05300 | ANESTHESIOLOGY                       | 0 |                                                 | 714,051                                           | 714,051                                                      | 105,748,422                                           | 0.006752                                                            | 53.00  |
| 54.00                                                                            | 05400 | RADIOLOGY-DIAGNOSTIC                 | 0 |                                                 | 409,771                                           | 409,771                                                      | 331,958,947                                           | 0.001234                                                            | 54.00  |
| 55.00                                                                            | 05500 | RADIOLOGY-THERAPEUTIC                | 0 |                                                 | 306,297                                           | 306,297                                                      | 104,218,743                                           | 0.002939                                                            | 55.00  |
| 56.00                                                                            | 05600 | RADIOISOTOPE                         | 0 |                                                 | 16,940                                            | 16,940                                                       | 26,977,593                                            | 0.000628                                                            | 56.00  |
| 60.00                                                                            | 06000 | LABORATORY                           | 0 |                                                 | 682,482                                           | 682,482                                                      | 505,162,168                                           | 0.001351                                                            | 60.00  |
| 60.01                                                                            | 06002 | LABORATORY - HLA                     | 0 |                                                 | 7,441                                             | 7,441                                                        | 5,346,855                                             | 0.001392                                                            | 60.01  |
| 61.00                                                                            | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  | 0 |                                                 |                                                   |                                                              |                                                       |                                                                     | 61.00  |
| 62.00                                                                            | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 0 |                                                 | 45,797                                            | 45,797                                                       | 51,776,689                                            | 0.000885                                                            | 62.00  |
| 64.00                                                                            | 06400 | INTRAVENOUS THERAPY                  | 0 |                                                 | 5                                                 | 5                                                            | 42,428,576                                            | 0.000000                                                            | 64.00  |
| 65.00                                                                            | 06500 | RESPIRATORY THERAPY                  | 0 |                                                 | 608,291                                           | 608,291                                                      | 47,217,670                                            | 0.012883                                                            | 65.00  |
| 66.00                                                                            | 06600 | PHYSICAL THERAPY                     | 0 |                                                 | 26,025                                            | 26,025                                                       | 30,173,047                                            | 0.000863                                                            | 66.00  |
| 67.00                                                                            | 06700 | OCCUPATIONAL THERAPY                 | 0 |                                                 | 130,754                                           | 130,754                                                      | 20,675,110                                            | 0.006324                                                            | 67.00  |
| 68.00                                                                            | 06800 | SPEECH PATHOLOGY                     | 0 |                                                 | 14,948                                            | 14,948                                                       | 12,314,915                                            | 0.001214                                                            | 68.00  |
| 69.00                                                                            | 06900 | ELECTROCARDIOLOGY                    | 0 |                                                 | 104,767                                           | 104,767                                                      | 114,506,442                                           | 0.000915                                                            | 69.00  |
| 70.00                                                                            | 07000 | ELECTROENCEPHALOGRAPHY               | 0 |                                                 | 7,351                                             | 7,351                                                        | 21,558,447                                            | 0.000341                                                            | 70.00  |
| 71.00                                                                            | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 0 |                                                 | 0                                                 | 0                                                            | 119,207,798                                           | 0.000000                                                            | 71.00  |
| 72.00                                                                            | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 0 |                                                 | 0                                                 | 0                                                            | 258,961,229                                           | 0.000000                                                            | 72.00  |
| 73.00                                                                            | 07300 | DRUGS CHARGED TO PATIENTS            | 0 |                                                 | 1,017,024                                         | 1,017,024                                                    | 742,934,278                                           | 0.001369                                                            | 73.00  |
| 74.00                                                                            | 07400 | RENAL DIALYSIS                       | 0 |                                                 | 0                                                 | 0                                                            | 0                                                     | 0.000000                                                            | 74.00  |
| 76.00                                                                            | 03020 | RENAL DIALYSIS ADULT                 | 0 |                                                 | 13,454                                            | 13,454                                                       | 14,193,973                                            | 0.000948                                                            | 76.00  |
| 76.01                                                                            | 03550 | PSYCH DAY HOSPITAL                   | 0 |                                                 | 16,644                                            | 16,644                                                       | 538,293                                               | 0.030920                                                            | 76.01  |
| OUTPATIENT SERVICE COST CENTERS                                                  |       |                                      |   |                                                 |                                                   |                                                              |                                                       |                                                                     |        |
| 90.00                                                                            | 09000 | CLINIC                               | 0 |                                                 | 328,102                                           | 328,102                                                      | 268,701,046                                           | 0.001221                                                            | 90.00  |
| 91.00                                                                            | 09100 | EMERGENCY                            | 0 |                                                 | 75,355                                            | 75,355                                                       | 171,714,682                                           | 0.000439                                                            | 91.00  |
| 92.00                                                                            | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 0 |                                                 | 0                                                 | 0                                                            | 13,762,720                                            | 0.000000                                                            | 92.00  |
| 92.01                                                                            | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0 |                                                 | 0                                                 | 0                                                            | 0                                                     | 0.000000                                                            | 92.01  |
| 93.00                                                                            | 04040 | BEHAVIORAL HEALTH                    | 0 |                                                 | 0                                                 | 0                                                            | 0                                                     | 0.000000                                                            | 93.00  |
| OTHER REIMBURSABLE COST CENTERS                                                  |       |                                      |   |                                                 |                                                   |                                                              |                                                       |                                                                     |        |
| 94.00                                                                            | 09400 | HOME PROGRAM DIALYSIS                | 0 |                                                 | 0                                                 | 0                                                            | 0                                                     | 0.000000                                                            | 94.00  |
| 98.00                                                                            | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0 |                                                 | 0                                                 | 0                                                            | 0                                                     | 0.000000                                                            | 98.00  |
| 200.00                                                                           |       | Total (lines 50 through 199)         | 0 |                                                 | 5,086,703                                         | 5,086,703                                                    | 3,462,617,002                                         |                                                                     | 200.00 |

| APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS |       |                                      |          | Provider CCN: 14-0119<br>Component CCN: 14-S119                   |                                 | Period:<br>From 07/01/2018<br>To 06/30/2019                         |                                                                          | Worksheet D<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm        |        |
|----------------------------------------------------------------------------------|-------|--------------------------------------|----------|-------------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------|--------|
|                                                                                  |       |                                      |          | Title XVIII                                                       |                                 | Subprovider -<br>IPF                                                |                                                                          | PPS                                                                        |        |
| Cost Center Description                                                          |       |                                      |          | Outpatient<br>Ratio of Cost<br>to Charges<br>(col. 6 ÷ col.<br>7) | Inpatient<br>Program<br>Charges | Inpatient<br>Program<br>Pass-Through<br>Costs (col. 8<br>x col. 10) | Outpatient<br>Program<br>Charges before<br>Geo<br>Reclassification<br>on | Outpatient<br>Program<br>Charges<br>on/after Geo<br>Reclassification<br>on |        |
|                                                                                  |       |                                      |          | 9.00                                                              | 10.00                           | 11.00                                                               | 12.00                                                                    | 12.01                                                                      |        |
| ANCILLARY SERVICE COST CENTERS                                                   |       |                                      |          |                                                                   |                                 |                                                                     |                                                                          |                                                                            |        |
| 50.00                                                                            | 05000 | OPERATING ROOM                       | 0.001264 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 50.00  |
| 51.00                                                                            | 05100 | RECOVERY ROOM                        | 0.000940 | 239,050                                                           | 225                             | 0                                                                   | 0                                                                        | 0                                                                          | 51.00  |
| 52.00                                                                            | 05200 | DELIVERY ROOM & LABOR ROOM           | 0.001309 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 52.00  |
| 53.00                                                                            | 05300 | ANESTHESIOLOGY                       | 0.006752 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 53.00  |
| 54.00                                                                            | 05400 | RADIOLOGY-DIAGNOSTIC                 | 0.001234 | 139,622                                                           | 172                             | 0                                                                   | 0                                                                        | 0                                                                          | 54.00  |
| 55.00                                                                            | 05500 | RADIOLOGY-THERAPEUTIC                | 0.002939 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 55.00  |
| 56.00                                                                            | 05600 | RADIOISOTOPE                         | 0.000628 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 56.00  |
| 60.00                                                                            | 06000 | LABORATORY                           | 0.001351 | 382,510                                                           | 517                             | 0                                                                   | 0                                                                        | 0                                                                          | 60.00  |
| 60.01                                                                            | 06002 | LABORATORY - HLA                     | 0.001392 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 60.01  |
| 61.00                                                                            | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  |          |                                                                   |                                 |                                                                     |                                                                          |                                                                            | 61.00  |
| 62.00                                                                            | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 0.000885 | 387                                                               | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 62.00  |
| 64.00                                                                            | 06400 | INTRAVENOUS THERAPY                  | 0.000000 | 31,635                                                            | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 64.00  |
| 65.00                                                                            | 06500 | RESPIRATORY THERAPY                  | 0.012883 | 21,750                                                            | 280                             | 0                                                                   | 0                                                                        | 0                                                                          | 65.00  |
| 66.00                                                                            | 06600 | PHYSICAL THERAPY                     | 0.000863 | 13,260                                                            | 11                              | 0                                                                   | 0                                                                        | 0                                                                          | 66.00  |
| 67.00                                                                            | 06700 | OCCUPATIONAL THERAPY                 | 0.006324 | 200,706                                                           | 1,269                           | 0                                                                   | 0                                                                        | 0                                                                          | 67.00  |
| 68.00                                                                            | 06800 | SPEECH PATHOLOGY                     | 0.001214 | 7,922                                                             | 10                              | 0                                                                   | 0                                                                        | 0                                                                          | 68.00  |
| 69.00                                                                            | 06900 | ELECTROCARDIOLOGY                    | 0.000915 | 55,266                                                            | 51                              | 0                                                                   | 0                                                                        | 0                                                                          | 69.00  |
| 70.00                                                                            | 07000 | ELECTROENCEPHALOGRAPHY               | 0.000341 | 13,940                                                            | 5                               | 0                                                                   | 0                                                                        | 0                                                                          | 70.00  |
| 71.00                                                                            | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 71.00  |
| 72.00                                                                            | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 72.00  |
| 73.00                                                                            | 07300 | DRUGS CHARGED TO PATIENTS            | 0.001369 | 441,194                                                           | 604                             | 0                                                                   | 0                                                                        | 0                                                                          | 73.00  |
| 74.00                                                                            | 07400 | RENAL DIALYSIS                       | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 74.00  |
| 76.00                                                                            | 03020 | RENAL DIALYSIS ADULT                 | 0.000948 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 76.00  |
| 76.01                                                                            | 03550 | PSYCH DAY HOSPITAL                   | 0.030920 | 251                                                               | 8                               | 0                                                                   | 0                                                                        | 0                                                                          | 76.01  |
| OUTPATIENT SERVICE COST CENTERS                                                  |       |                                      |          |                                                                   |                                 |                                                                     |                                                                          |                                                                            |        |
| 90.00                                                                            | 09000 | CLINIC                               | 0.001221 | 3,872                                                             | 5                               | 0                                                                   | 0                                                                        | 0                                                                          | 90.00  |
| 91.00                                                                            | 09100 | EMERGENCY                            | 0.000439 | 327,718                                                           | 144                             | 0                                                                   | 0                                                                        | 0                                                                          | 91.00  |
| 92.00                                                                            | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 92.00  |
| 92.01                                                                            | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 92.01  |
| 93.00                                                                            | 04040 | BEHAVIORAL HEALTH                    | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS                                                  |       |                                      |          |                                                                   |                                 |                                                                     |                                                                          |                                                                            |        |
| 94.00                                                                            | 09400 | HOME PROGRAM DIALYSIS                | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 94.00  |
| 98.00                                                                            | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 98.00  |
| 200.00                                                                           |       | Total (lines 50 through 199)         |          | 1,879,083                                                         | 3,301                           | 0                                                                   | 0                                                                        | 0                                                                          | 200.00 |

|                                                                                  |       |                                      |                                                                                                                       |                                                                                                                         |                                             |                                                                     |
|----------------------------------------------------------------------------------|-------|--------------------------------------|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|---------------------------------------------|---------------------------------------------------------------------|
| APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS |       |                                      | Provider CCN: 14-0119<br>Component CCN: 14-S119                                                                       |                                                                                                                         | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|                                                                                  |       |                                      | Title XVIII                                                                                                           |                                                                                                                         | Subprovider -<br>IPF                        | PPS                                                                 |
| Cost Center Description                                                          |       |                                      | Outpatient<br>Program<br>Pass-Through<br>Costs (col. 9<br>x col. 12)<br>before Geo<br>Reclassification<br>on<br>13.00 | Outpatient<br>Program<br>Pass-Through<br>Costs (col. 9<br>x col. 12)<br>on/after Geo<br>Reclassification<br>on<br>13.01 |                                             |                                                                     |
| ANCILLARY SERVICE COST CENTERS                                                   |       |                                      |                                                                                                                       |                                                                                                                         |                                             |                                                                     |
| 50.00                                                                            | 05000 | OPERATING ROOM                       | 0                                                                                                                     | 0                                                                                                                       |                                             | 50.00                                                               |
| 51.00                                                                            | 05100 | RECOVERY ROOM                        | 0                                                                                                                     | 0                                                                                                                       |                                             | 51.00                                                               |
| 52.00                                                                            | 05200 | DELIVERY ROOM & LABOR ROOM           | 0                                                                                                                     | 0                                                                                                                       |                                             | 52.00                                                               |
| 53.00                                                                            | 05300 | ANESTHESIOLOGY                       | 0                                                                                                                     | 0                                                                                                                       |                                             | 53.00                                                               |
| 54.00                                                                            | 05400 | RADIOLOGY-DIAGNOSTIC                 | 0                                                                                                                     | 0                                                                                                                       |                                             | 54.00                                                               |
| 55.00                                                                            | 05500 | RADIOLOGY-THERAPEUTIC                | 0                                                                                                                     | 0                                                                                                                       |                                             | 55.00                                                               |
| 56.00                                                                            | 05600 | RADIOISOTOPE                         | 0                                                                                                                     | 0                                                                                                                       |                                             | 56.00                                                               |
| 60.00                                                                            | 06000 | LABORATORY                           | 0                                                                                                                     | 0                                                                                                                       |                                             | 60.00                                                               |
| 60.01                                                                            | 06002 | LABORATORY - HLA                     | 0                                                                                                                     | 0                                                                                                                       |                                             | 60.01                                                               |
| 61.00                                                                            | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  |                                                                                                                       |                                                                                                                         |                                             | 61.00                                                               |
| 62.00                                                                            | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 0                                                                                                                     | 0                                                                                                                       |                                             | 62.00                                                               |
| 64.00                                                                            | 06400 | INTRAVENOUS THERAPY                  | 0                                                                                                                     | 0                                                                                                                       |                                             | 64.00                                                               |
| 65.00                                                                            | 06500 | RESPIRATORY THERAPY                  | 0                                                                                                                     | 0                                                                                                                       |                                             | 65.00                                                               |
| 66.00                                                                            | 06600 | PHYSICAL THERAPY                     | 0                                                                                                                     | 0                                                                                                                       |                                             | 66.00                                                               |
| 67.00                                                                            | 06700 | OCCUPATIONAL THERAPY                 | 0                                                                                                                     | 0                                                                                                                       |                                             | 67.00                                                               |
| 68.00                                                                            | 06800 | SPEECH PATHOLOGY                     | 0                                                                                                                     | 0                                                                                                                       |                                             | 68.00                                                               |
| 69.00                                                                            | 06900 | ELECTROCARDIOLOGY                    | 0                                                                                                                     | 0                                                                                                                       |                                             | 69.00                                                               |
| 70.00                                                                            | 07000 | ELECTROENCEPHALOGRAPHY               | 0                                                                                                                     | 0                                                                                                                       |                                             | 70.00                                                               |
| 71.00                                                                            | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 0                                                                                                                     | 0                                                                                                                       |                                             | 71.00                                                               |
| 72.00                                                                            | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 0                                                                                                                     | 0                                                                                                                       |                                             | 72.00                                                               |
| 73.00                                                                            | 07300 | DRUGS CHARGED TO PATIENTS            | 0                                                                                                                     | 0                                                                                                                       |                                             | 73.00                                                               |
| 74.00                                                                            | 07400 | RENAL DIALYSIS                       | 0                                                                                                                     | 0                                                                                                                       |                                             | 74.00                                                               |
| 76.00                                                                            | 03020 | RENAL DIALYSIS ADULT                 | 0                                                                                                                     | 0                                                                                                                       |                                             | 76.00                                                               |
| 76.01                                                                            | 03550 | PSYCH DAY HOSPITAL                   | 0                                                                                                                     | 0                                                                                                                       |                                             | 76.01                                                               |
| OUTPATIENT SERVICE COST CENTERS                                                  |       |                                      |                                                                                                                       |                                                                                                                         |                                             |                                                                     |
| 90.00                                                                            | 09000 | CLINIC                               | 0                                                                                                                     | 0                                                                                                                       |                                             | 90.00                                                               |
| 91.00                                                                            | 09100 | EMERGENCY                            | 0                                                                                                                     | 0                                                                                                                       |                                             | 91.00                                                               |
| 92.00                                                                            | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 0                                                                                                                     | 0                                                                                                                       |                                             | 92.00                                                               |
| 92.01                                                                            | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0                                                                                                                     | 0                                                                                                                       |                                             | 92.01                                                               |
| 93.00                                                                            | 04040 | BEHAVIORAL HEALTH                    | 0                                                                                                                     | 0                                                                                                                       |                                             | 93.00                                                               |
| OTHER REIMBURSABLE COST CENTERS                                                  |       |                                      |                                                                                                                       |                                                                                                                         |                                             |                                                                     |
| 94.00                                                                            | 09400 | HOME PROGRAM DIALYSIS                | 0                                                                                                                     | 0                                                                                                                       |                                             | 94.00                                                               |
| 98.00                                                                            | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0                                                                                                                     | 0                                                                                                                       |                                             | 98.00                                                               |
| 200.00                                                                           |       | Total (lines 50 through 199)         | 0                                                                                                                     | 0                                                                                                                       |                                             | 200.00                                                              |

## APPORTIONMENT OF INPATIENT ANCILLARY SERVICE CAPITAL COSTS

Provider CCN: 14-0119

Period:

Worksheet D

Component CCN: 14-T119

From 07/01/2018  
To 06/30/2019Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

Title XVIII

Subprovider -  
IRF

PPS

| Cost Center Description         |                                            | Capital<br>Related Cost<br>(from Wkst. B,<br>Part II, col.<br>26) | Total Charges<br>(from Wkst. C,<br>Part I, col.<br>8) | Ratio of Cost<br>to Charges<br>(col. 1 ÷ col.<br>2) | Inpatient<br>Program<br>Charges | Capital Costs<br>(column 3 x<br>column 4) |        |
|---------------------------------|--------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------|-----------------------------------------------------|---------------------------------|-------------------------------------------|--------|
|                                 |                                            | 1.00                                                              | 2.00                                                  | 3.00                                                | 4.00                            | 5.00                                      |        |
| ANCILLARY SERVICE COST CENTERS  |                                            |                                                                   |                                                       |                                                     |                                 |                                           |        |
| 50.00                           | 05000 OPERATING ROOM                       | 7,016,329                                                         | 388,607,582                                           | 0.018055                                            | 88,066                          | 1,590                                     | 50.00  |
| 51.00                           | 05100 RECOVERY ROOM                        | 1,634,704                                                         | 37,144,567                                            | 0.044009                                            | 22,596                          | 994                                       | 51.00  |
| 52.00                           | 05200 DELIVERY ROOM & LABOR ROOM           | 1,232,449                                                         | 26,787,210                                            | 0.046009                                            | 0                               | 0                                         | 52.00  |
| 53.00                           | 05300 ANESTHESIOLOGY                       | 929,801                                                           | 105,748,422                                           | 0.008793                                            | 30,664                          | 270                                       | 53.00  |
| 54.00                           | 05400 RADIOLOGY-DIAGNOSTIC                 | 4,329,270                                                         | 331,958,947                                           | 0.013042                                            | 591,650                         | 7,716                                     | 54.00  |
| 55.00                           | 05500 RADIOLOGY-THERAPEUTIC                | 1,254,373                                                         | 104,218,743                                           | 0.012036                                            | 130,555                         | 1,571                                     | 55.00  |
| 56.00                           | 05600 RADIOISOTOPE                         | 353,697                                                           | 26,977,593                                            | 0.013111                                            | 0                               | 0                                         | 56.00  |
| 60.00                           | 06000 LABORATORY                           | 5,739,724                                                         | 505,162,168                                           | 0.011362                                            | 1,116,744                       | 12,688                                    | 60.00  |
| 60.01                           | 06002 LABORATORY - HLA                     | 77,742                                                            | 5,346,855                                             | 0.014540                                            | 0                               | 0                                         | 60.01  |
| 61.00                           | 06100 PBP CLINICAL LAB SERVICES-PRGM ONLY  |                                                                   |                                                       |                                                     |                                 |                                           | 61.00  |
| 62.00                           | 06200 WHOLE BLOOD & PACKED RED BLOOD CELLS | 332,265                                                           | 51,776,689                                            | 0.006417                                            | 48,493                          | 311                                       | 62.00  |
| 64.00                           | 06400 INTRAVENOUS THERAPY                  | 47,052                                                            | 42,428,576                                            | 0.001109                                            | 349,241                         | 387                                       | 64.00  |
| 65.00                           | 06500 RESPIRATORY THERAPY                  | 454,390                                                           | 47,217,670                                            | 0.009623                                            | 264,070                         | 2,541                                     | 65.00  |
| 66.00                           | 06600 PHYSICAL THERAPY                     | 542,923                                                           | 30,173,047                                            | 0.017994                                            | 2,385,720                       | 42,929                                    | 66.00  |
| 67.00                           | 06700 OCCUPATIONAL THERAPY                 | 459,388                                                           | 20,675,110                                            | 0.022219                                            | 2,296,539                       | 51,027                                    | 67.00  |
| 68.00                           | 06800 SPEECH PATHOLOGY                     | 267,533                                                           | 12,314,915                                            | 0.021724                                            | 786,132                         | 17,078                                    | 68.00  |
| 69.00                           | 06900 ELECTROCARDIOLOGY                    | 1,042,551                                                         | 114,506,442                                           | 0.009105                                            | 46,907                          | 427                                       | 69.00  |
| 70.00                           | 07000 ELECTROENCEPHALOGRAPHY               | 161,971                                                           | 21,558,447                                            | 0.007513                                            | 7,961                           | 60                                        | 70.00  |
| 71.00                           | 07100 MEDICAL SUPPLIES CHARGED TO PATIENTS | 194,381                                                           | 119,207,798                                           | 0.001631                                            | 0                               | 0                                         | 71.00  |
| 72.00                           | 07200 IMPL. DEV. CHARGED TO PATIENTS       | 410,924                                                           | 258,961,229                                           | 0.001587                                            | 0                               | 0                                         | 72.00  |
| 73.00                           | 07300 DRUGS CHARGED TO PATIENTS            | 1,645,659                                                         | 742,934,278                                           | 0.002215                                            | 1,377,671                       | 3,052                                     | 73.00  |
| 74.00                           | 07400 RENAL DIALYSIS                       | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 74.00  |
| 76.00                           | 03020 RENAL DIALYSIS ADULT                 | 124,680                                                           | 14,193,973                                            | 0.008784                                            | 210,040                         | 1,845                                     | 76.00  |
| 76.01                           | 03550 PSYCH DAY HOSPITAL                   | 381,427                                                           | 538,293                                               | 0.708586                                            | 0                               | 0                                         | 76.01  |
| OUTPATIENT SERVICE COST CENTERS |                                            |                                                                   |                                                       |                                                     |                                 |                                           |        |
| 90.00                           | 09000 CLINIC                               | 5,253,854                                                         | 268,701,046                                           | 0.019553                                            | 108                             | 2                                         | 90.00  |
| 91.00                           | 09100 EMERGENCY                            | 3,113,237                                                         | 171,714,682                                           | 0.018130                                            | 0                               | 0                                         | 91.00  |
| 92.00                           | 09200 OBSERVATION BEDS (NON-DISTINCT PART) | 0                                                                 | 13,762,720                                            | 0.000000                                            | 0                               | 0                                         | 92.00  |
| 92.01                           | 09201 OBSERVATION BEDS (DISTINCT PART)     | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 92.01  |
| 93.00                           | 04040 BEHAVIORAL HEALTH                    | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 93.00  |
| OTHER REIMBURSABLE COST CENTERS |                                            |                                                                   |                                                       |                                                     |                                 |                                           |        |
| 94.00                           | 09400 HOME PROGRAM DIALYSIS                | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 94.00  |
| 98.00                           | 09850 OTHER REIMBURSABLE COST CENTERS      | 0                                                                 | 0                                                     | 0.000000                                            | 0                               | 0                                         | 98.00  |
| 200.00                          | Total (lines 50 through 199)               | 37,000,324                                                        | 3,462,617,002                                         |                                                     | 9,753,157                       | 144,488                                   | 200.00 |

| APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS |       |                                      |  | Provider CCN: 14-0119<br>Component CCN: 14-T119 |                                                | Period:<br>From 07/01/2018<br>To 06/30/2019 |                                               | Worksheet D<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |        |
|----------------------------------------------------------------------------------|-------|--------------------------------------|--|-------------------------------------------------|------------------------------------------------|---------------------------------------------|-----------------------------------------------|---------------------------------------------------------------------|--------|
|                                                                                  |       |                                      |  | Title XVIII                                     |                                                | Subprovider -<br>IRF                        |                                               | PPS                                                                 |        |
| Cost Center Description                                                          |       |                                      |  | Non Physician<br>Anesthetist<br>Cost            | Nursing School<br>Post-Stepdown<br>Adjustments | Nursing School                              | Allied Health<br>Post-Stepdown<br>Adjustments | Allied Health                                                       |        |
|                                                                                  |       |                                      |  | 1.00                                            | 2A                                             | 2.00                                        | 3A                                            | 3.00                                                                |        |
| ANCILLARY SERVICE COST CENTERS                                                   |       |                                      |  |                                                 |                                                |                                             |                                               |                                                                     |        |
| 50.00                                                                            | 05000 | OPERATING ROOM                       |  | 0                                               | 0                                              | 0                                           | 0                                             | 491,223                                                             | 50.00  |
| 51.00                                                                            | 05100 | RECOVERY ROOM                        |  | 0                                               | 0                                              | 0                                           | 0                                             | 34,926                                                              | 51.00  |
| 52.00                                                                            | 05200 | DELIVERY ROOM & LABOR ROOM           |  | 0                                               | 0                                              | 0                                           | 0                                             | 35,055                                                              | 52.00  |
| 53.00                                                                            | 05300 | ANESTHESIOLOGY                       |  | 0                                               | 0                                              | 671,230                                     | 0                                             | 42,821                                                              | 53.00  |
| 54.00                                                                            | 05400 | RADIOLOGY-DIAGNOSTIC                 |  | 0                                               | 0                                              | 0                                           | 0                                             | 409,771                                                             | 54.00  |
| 55.00                                                                            | 05500 | RADIOLOGY-THERAPEUTIC                |  | 0                                               | 0                                              | 0                                           | 0                                             | 306,297                                                             | 55.00  |
| 56.00                                                                            | 05600 | RADIOISOTOPE                         |  | 0                                               | 0                                              | 0                                           | 0                                             | 16,940                                                              | 56.00  |
| 60.00                                                                            | 06000 | LABORATORY                           |  | 0                                               | 0                                              | 0                                           | 0                                             | 682,482                                                             | 60.00  |
| 60.01                                                                            | 06002 | LABORATORY - HLA                     |  | 0                                               | 0                                              | 0                                           | 0                                             | 7,441                                                               | 60.01  |
| 61.00                                                                            | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  |  | 0                                               | 0                                              | 0                                           | 0                                             |                                                                     | 61.00  |
| 62.00                                                                            | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS |  | 0                                               | 0                                              | 0                                           | 0                                             | 45,797                                                              | 62.00  |
| 64.00                                                                            | 06400 | INTRAVENOUS THERAPY                  |  | 0                                               | 0                                              | 0                                           | 0                                             | 5                                                                   | 64.00  |
| 65.00                                                                            | 06500 | RESPIRATORY THERAPY                  |  | 0                                               | 0                                              | 0                                           | 0                                             | 608,291                                                             | 65.00  |
| 66.00                                                                            | 06600 | PHYSICAL THERAPY                     |  | 0                                               | 0                                              | 0                                           | 0                                             | 26,025                                                              | 66.00  |
| 67.00                                                                            | 06700 | OCCUPATIONAL THERAPY                 |  | 0                                               | 0                                              | 0                                           | 0                                             | 130,754                                                             | 67.00  |
| 68.00                                                                            | 06800 | SPEECH PATHOLOGY                     |  | 0                                               | 0                                              | 0                                           | 0                                             | 14,948                                                              | 68.00  |
| 69.00                                                                            | 06900 | ELECTROCARDIOLOGY                    |  | 0                                               | 0                                              | 0                                           | 0                                             | 104,767                                                             | 69.00  |
| 70.00                                                                            | 07000 | ELECTROENCEPHALOGRAPHY               |  | 0                                               | 0                                              | 0                                           | 0                                             | 7,351                                                               | 70.00  |
| 71.00                                                                            | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 71.00  |
| 72.00                                                                            | 07200 | IMPL. DEV. CHARGED TO PATIENTS       |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 72.00  |
| 73.00                                                                            | 07300 | DRUGS CHARGED TO PATIENTS            |  | 0                                               | 0                                              | 0                                           | 0                                             | 1,017,024                                                           | 73.00  |
| 74.00                                                                            | 07400 | RENAL DIALYSIS                       |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 74.00  |
| 76.00                                                                            | 03020 | RENAL DIALYSIS ADULT                 |  | 0                                               | 0                                              | 0                                           | 0                                             | 13,454                                                              | 76.00  |
| 76.01                                                                            | 03550 | PSYCH DAY HOSPITAL                   |  | 0                                               | 0                                              | 0                                           | 0                                             | 16,644                                                              | 76.01  |
| OUTPATIENT SERVICE COST CENTERS                                                  |       |                                      |  |                                                 |                                                |                                             |                                               |                                                                     |        |
| 90.00                                                                            | 09000 | CLINIC                               |  | 0                                               | 0                                              | 0                                           | 0                                             | 328,102                                                             | 90.00  |
| 91.00                                                                            | 09100 | EMERGENCY                            |  | 0                                               | 0                                              | 0                                           | 0                                             | 75,355                                                              | 91.00  |
| 92.00                                                                            | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 92.00  |
| 92.01                                                                            | 09201 | OBSERVATION BEDS (DISTINCT PART)     |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 92.01  |
| 93.00                                                                            | 04040 | BEHAVIORAL HEALTH                    |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 93.00  |
| OTHER REIMBURSABLE COST CENTERS                                                  |       |                                      |  |                                                 |                                                |                                             |                                               |                                                                     |        |
| 94.00                                                                            | 09400 | HOME PROGRAM DIALYSIS                |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 94.00  |
| 98.00                                                                            | 09850 | OTHER REIMBURSABLE COST CENTERS      |  | 0                                               | 0                                              | 0                                           | 0                                             | 0                                                                   | 98.00  |
| 200.00                                                                           |       | Total (lines 50 through 199)         |  | 0                                               | 0                                              | 671,230                                     | 0                                             | 4,415,473                                                           | 200.00 |

| APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS |       |                                      |   |  | Provider CCN: 14-0119<br>Component CCN: 14-T119 |                                                   | Period:<br>From 07/01/2018<br>To 06/30/2019                  |                                                       | Worksheet D<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |  |
|----------------------------------------------------------------------------------|-------|--------------------------------------|---|--|-------------------------------------------------|---------------------------------------------------|--------------------------------------------------------------|-------------------------------------------------------|---------------------------------------------------------------------|--|
|                                                                                  |       |                                      |   |  | Title XVIII                                     |                                                   | Subprovider -<br>IRF                                         |                                                       | PPS                                                                 |  |
| Cost Center Description                                                          |       |                                      |   |  | All Other<br>Medical<br>Education Cost          | Total Cost<br>(sum of cols.<br>1, 2, 3, and<br>4) | Total<br>Outpatient<br>Cost (sum of<br>cols. 2, 3,<br>and 4) | Total Charges<br>(from Wkst. C,<br>Part I, col.<br>8) | Ratio of Cost<br>to Charges<br>(col. 5 ÷ col.<br>7)                 |  |
|                                                                                  |       |                                      |   |  | 4.00                                            | 5.00                                              | 6.00                                                         | 7.00                                                  | 8.00                                                                |  |
| ANCILLARY SERVICE COST CENTERS                                                   |       |                                      |   |  |                                                 |                                                   |                                                              |                                                       |                                                                     |  |
| 50.00                                                                            | 05000 | OPERATING ROOM                       | 0 |  | 491,223                                         | 491,223                                           | 388,607,582                                                  | 0.001264                                              | 50.00                                                               |  |
| 51.00                                                                            | 05100 | RECOVERY ROOM                        | 0 |  | 34,926                                          | 34,926                                            | 37,144,567                                                   | 0.000940                                              | 51.00                                                               |  |
| 52.00                                                                            | 05200 | DELIVERY ROOM & LABOR ROOM           | 0 |  | 35,055                                          | 35,055                                            | 26,787,210                                                   | 0.001309                                              | 52.00                                                               |  |
| 53.00                                                                            | 05300 | ANESTHESIOLOGY                       | 0 |  | 714,051                                         | 714,051                                           | 105,748,422                                                  | 0.006752                                              | 53.00                                                               |  |
| 54.00                                                                            | 05400 | RADIOLOGY-DIAGNOSTIC                 | 0 |  | 409,771                                         | 409,771                                           | 331,958,947                                                  | 0.001234                                              | 54.00                                                               |  |
| 55.00                                                                            | 05500 | RADIOLOGY-THERAPEUTIC                | 0 |  | 306,297                                         | 306,297                                           | 104,218,743                                                  | 0.002939                                              | 55.00                                                               |  |
| 56.00                                                                            | 05600 | RADIOISOTOPE                         | 0 |  | 16,940                                          | 16,940                                            | 26,977,593                                                   | 0.000628                                              | 56.00                                                               |  |
| 60.00                                                                            | 06000 | LABORATORY                           | 0 |  | 682,482                                         | 682,482                                           | 505,162,168                                                  | 0.001351                                              | 60.00                                                               |  |
| 60.01                                                                            | 06002 | LABORATORY - HLA                     | 0 |  | 7,441                                           | 7,441                                             | 5,346,855                                                    | 0.001392                                              | 60.01                                                               |  |
| 61.00                                                                            | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  |   |  |                                                 |                                                   |                                                              |                                                       | 61.00                                                               |  |
| 62.00                                                                            | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 0 |  | 45,797                                          | 45,797                                            | 51,776,689                                                   | 0.000885                                              | 62.00                                                               |  |
| 64.00                                                                            | 06400 | INTRAVENOUS THERAPY                  | 0 |  | 5                                               | 5                                                 | 42,428,576                                                   | 0.000000                                              | 64.00                                                               |  |
| 65.00                                                                            | 06500 | RESPIRATORY THERAPY                  | 0 |  | 608,291                                         | 608,291                                           | 47,217,670                                                   | 0.012883                                              | 65.00                                                               |  |
| 66.00                                                                            | 06600 | PHYSICAL THERAPY                     | 0 |  | 26,025                                          | 26,025                                            | 30,173,047                                                   | 0.000863                                              | 66.00                                                               |  |
| 67.00                                                                            | 06700 | OCCUPATIONAL THERAPY                 | 0 |  | 130,754                                         | 130,754                                           | 20,675,110                                                   | 0.006324                                              | 67.00                                                               |  |
| 68.00                                                                            | 06800 | SPEECH PATHOLOGY                     | 0 |  | 14,948                                          | 14,948                                            | 12,314,915                                                   | 0.001214                                              | 68.00                                                               |  |
| 69.00                                                                            | 06900 | ELECTROCARDIOLOGY                    | 0 |  | 104,767                                         | 104,767                                           | 114,506,442                                                  | 0.000915                                              | 69.00                                                               |  |
| 70.00                                                                            | 07000 | ELECTROENCEPHALOGRAPHY               | 0 |  | 7,351                                           | 7,351                                             | 21,558,447                                                   | 0.000341                                              | 70.00                                                               |  |
| 71.00                                                                            | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 0 |  | 0                                               | 0                                                 | 119,207,798                                                  | 0.000000                                              | 71.00                                                               |  |
| 72.00                                                                            | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 0 |  | 0                                               | 0                                                 | 258,961,229                                                  | 0.000000                                              | 72.00                                                               |  |
| 73.00                                                                            | 07300 | DRUGS CHARGED TO PATIENTS            | 0 |  | 1,017,024                                       | 1,017,024                                         | 742,934,278                                                  | 0.001369                                              | 73.00                                                               |  |
| 74.00                                                                            | 07400 | RENAL DIALYSIS                       | 0 |  | 0                                               | 0                                                 | 0                                                            | 0.000000                                              | 74.00                                                               |  |
| 76.00                                                                            | 03020 | RENAL DIALYSIS ADULT                 | 0 |  | 13,454                                          | 13,454                                            | 14,193,973                                                   | 0.000948                                              | 76.00                                                               |  |
| 76.01                                                                            | 03550 | PSYCH DAY HOSPITAL                   | 0 |  | 16,644                                          | 16,644                                            | 538,293                                                      | 0.030920                                              | 76.01                                                               |  |
| OUTPATIENT SERVICE COST CENTERS                                                  |       |                                      |   |  |                                                 |                                                   |                                                              |                                                       |                                                                     |  |
| 90.00                                                                            | 09000 | CLINIC                               | 0 |  | 328,102                                         | 328,102                                           | 268,701,046                                                  | 0.001221                                              | 90.00                                                               |  |
| 91.00                                                                            | 09100 | EMERGENCY                            | 0 |  | 75,355                                          | 75,355                                            | 171,714,682                                                  | 0.000439                                              | 91.00                                                               |  |
| 92.00                                                                            | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 0 |  | 0                                               | 0                                                 | 13,762,720                                                   | 0.000000                                              | 92.00                                                               |  |
| 92.01                                                                            | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0 |  | 0                                               | 0                                                 | 0                                                            | 0.000000                                              | 92.01                                                               |  |
| 93.00                                                                            | 04040 | BEHAVIORAL HEALTH                    | 0 |  | 0                                               | 0                                                 | 0                                                            | 0.000000                                              | 93.00                                                               |  |
| OTHER REIMBURSABLE COST CENTERS                                                  |       |                                      |   |  |                                                 |                                                   |                                                              |                                                       |                                                                     |  |
| 94.00                                                                            | 09400 | HOME PROGRAM DIALYSIS                | 0 |  | 0                                               | 0                                                 | 0                                                            | 0.000000                                              | 94.00                                                               |  |
| 98.00                                                                            | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0 |  | 0                                               | 0                                                 | 0                                                            | 0.000000                                              | 98.00                                                               |  |
| 200.00                                                                           |       | Total (lines 50 through 199)         | 0 |  | 5,086,703                                       | 5,086,703                                         | 3,462,617,002                                                |                                                       | 200.00                                                              |  |

| APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS |       |                                      |          | Provider CCN: 14-0119<br>Component CCN: 14-T119                   |                                 | Period:<br>From 07/01/2018<br>To 06/30/2019                         |                                                                          | Worksheet D<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm        |        |
|----------------------------------------------------------------------------------|-------|--------------------------------------|----------|-------------------------------------------------------------------|---------------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------|----------------------------------------------------------------------------|--------|
|                                                                                  |       |                                      |          | Title XVIII                                                       |                                 | Subprovider -<br>IRF                                                |                                                                          | PPS                                                                        |        |
| Cost Center Description                                                          |       |                                      |          | Outpatient<br>Ratio of Cost<br>to Charges<br>(col. 6 ÷ col.<br>7) | Inpatient<br>Program<br>Charges | Inpatient<br>Program<br>Pass-Through<br>Costs (col. 8<br>x col. 10) | Outpatient<br>Program<br>Charges before<br>Geo<br>Reclassification<br>on | Outpatient<br>Program<br>Charges<br>on/after Geo<br>Reclassification<br>on |        |
|                                                                                  |       |                                      |          | 9.00                                                              | 10.00                           | 11.00                                                               | 12.00                                                                    | 12.01                                                                      |        |
| ANCILLARY SERVICE COST CENTERS                                                   |       |                                      |          |                                                                   |                                 |                                                                     |                                                                          |                                                                            |        |
| 50.00                                                                            | 05000 | OPERATING ROOM                       | 0.001264 | 88,066                                                            | 111                             | 0                                                                   | 0                                                                        | 0                                                                          | 50.00  |
| 51.00                                                                            | 05100 | RECOVERY ROOM                        | 0.000940 | 22,596                                                            | 21                              | 0                                                                   | 0                                                                        | 0                                                                          | 51.00  |
| 52.00                                                                            | 05200 | DELIVERY ROOM & LABOR ROOM           | 0.001309 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 52.00  |
| 53.00                                                                            | 05300 | ANESTHESIOLOGY                       | 0.006752 | 30,664                                                            | 207                             | 0                                                                   | 0                                                                        | 0                                                                          | 53.00  |
| 54.00                                                                            | 05400 | RADIOLOGY-DIAGNOSTIC                 | 0.001234 | 591,650                                                           | 730                             | 0                                                                   | 0                                                                        | 0                                                                          | 54.00  |
| 55.00                                                                            | 05500 | RADIOLOGY-THERAPEUTIC                | 0.002939 | 130,555                                                           | 384                             | 0                                                                   | 0                                                                        | 0                                                                          | 55.00  |
| 56.00                                                                            | 05600 | RADIOISOTOPE                         | 0.000628 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 56.00  |
| 60.00                                                                            | 06000 | LABORATORY                           | 0.001351 | 1,116,744                                                         | 1,509                           | 0                                                                   | 0                                                                        | 0                                                                          | 60.00  |
| 60.01                                                                            | 06002 | LABORATORY - HLA                     | 0.001392 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 60.01  |
| 61.00                                                                            | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY  | 0.000885 | 48,493                                                            | 43                              | 0                                                                   | 0                                                                        | 0                                                                          | 61.00  |
| 62.00                                                                            | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS | 0.000000 | 349,241                                                           | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 62.00  |
| 64.00                                                                            | 06400 | INTRAVENOUS THERAPY                  | 0.012883 | 264,070                                                           | 3,402                           | 0                                                                   | 0                                                                        | 0                                                                          | 64.00  |
| 65.00                                                                            | 06500 | RESPIRATORY THERAPY                  | 0.000863 | 2,385,720                                                         | 2,059                           | 0                                                                   | 0                                                                        | 0                                                                          | 65.00  |
| 66.00                                                                            | 06600 | PHYSICAL THERAPY                     | 0.006324 | 2,296,539                                                         | 14,523                          | 0                                                                   | 0                                                                        | 0                                                                          | 66.00  |
| 67.00                                                                            | 06700 | OCCUPATIONAL THERAPY                 | 0.001214 | 786,132                                                           | 954                             | 0                                                                   | 0                                                                        | 0                                                                          | 67.00  |
| 68.00                                                                            | 06800 | SPEECH PATHOLOGY                     | 0.000915 | 46,907                                                            | 43                              | 0                                                                   | 0                                                                        | 0                                                                          | 68.00  |
| 69.00                                                                            | 06900 | ELECTROCARDIOLOGY                    | 0.000341 | 7,961                                                             | 3                               | 0                                                                   | 0                                                                        | 0                                                                          | 69.00  |
| 70.00                                                                            | 07000 | ELECTROENCEPHALOGRAPHY               | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 70.00  |
| 71.00                                                                            | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS | 0.001369 | 1,377,671                                                         | 1,886                           | 0                                                                   | 0                                                                        | 0                                                                          | 71.00  |
| 72.00                                                                            | 07200 | IMPL. DEV. CHARGED TO PATIENTS       | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 72.00  |
| 73.00                                                                            | 07300 | DRUGS CHARGED TO PATIENTS            | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 73.00  |
| 74.00                                                                            | 07400 | RENAL DIALYSIS                       | 0.000948 | 210,040                                                           | 199                             | 0                                                                   | 0                                                                        | 0                                                                          | 74.00  |
| 76.00                                                                            | 03020 | RENAL DIALYSIS ADULT                 | 0.030920 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 76.00  |
| 76.01                                                                            | 03550 | PSYCH DAY HOSPITAL                   |          |                                                                   |                                 |                                                                     |                                                                          |                                                                            | 76.01  |
| OUTPATIENT SERVICE COST CENTERS                                                  |       |                                      |          |                                                                   |                                 |                                                                     |                                                                          |                                                                            |        |
| 90.00                                                                            | 09000 | CLINIC                               | 0.001221 | 108                                                               | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 90.00  |
| 91.00                                                                            | 09100 | EMERGENCY                            | 0.000439 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 91.00  |
| 92.00                                                                            | 09200 | OBSERVATION BEDS (NON-DISTINCT PART) | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 92.00  |
| 92.01                                                                            | 09201 | OBSERVATION BEDS (DISTINCT PART)     | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 92.01  |
| 93.00                                                                            | 04040 | BEHAVIORAL HEALTH                    | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS                                                  |       |                                      |          |                                                                   |                                 |                                                                     |                                                                          |                                                                            |        |
| 94.00                                                                            | 09400 | HOME PROGRAM DIALYSIS                | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 94.00  |
| 98.00                                                                            | 09850 | OTHER REIMBURSABLE COST CENTERS      | 0.000000 | 0                                                                 | 0                               | 0                                                                   | 0                                                                        | 0                                                                          | 98.00  |
| 200.00                                                                           |       | Total (lines 50 through 199)         |          | 9,753,157                                                         | 26,074                          | 0                                                                   | 0                                                                        | 0                                                                          | 200.00 |

|                                                                                  |                                            |                                                                                                                       |                                                                                                                         |  |                                             |                                                                     |
|----------------------------------------------------------------------------------|--------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------|--|---------------------------------------------|---------------------------------------------------------------------|
| APPORTIONMENT OF INPATIENT/OUTPATIENT ANCILLARY SERVICE OTHER PASS THROUGH COSTS |                                            |                                                                                                                       | Provider CCN: 14-0119<br>Component CCN: 14-T119                                                                         |  | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D<br>Part IV<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|                                                                                  |                                            |                                                                                                                       | Title XVIII                                                                                                             |  | Subprovider -<br>IRF                        | PPS                                                                 |
|                                                                                  | Cost Center Description                    | Outpatient<br>Program<br>Pass-Through<br>Costs (col. 9<br>x col. 12)<br>before Geo<br>Reclassification<br>on<br>13.00 | Outpatient<br>Program<br>Pass-Through<br>Costs (col. 9<br>x col. 12)<br>on/after Geo<br>Reclassification<br>on<br>13.01 |  |                                             |                                                                     |
|                                                                                  | ANCILLARY SERVICE COST CENTERS             |                                                                                                                       |                                                                                                                         |  |                                             |                                                                     |
| 50.00                                                                            | 05000 OPERATING ROOM                       | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 50.00                                                               |
| 51.00                                                                            | 05100 RECOVERY ROOM                        | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 51.00                                                               |
| 52.00                                                                            | 05200 DELIVERY ROOM & LABOR ROOM           | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 52.00                                                               |
| 53.00                                                                            | 05300 ANESTHESIOLOGY                       | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 53.00                                                               |
| 54.00                                                                            | 05400 RADIOLOGY-DIAGNOSTIC                 | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 54.00                                                               |
| 55.00                                                                            | 05500 RADIOLOGY-THERAPEUTIC                | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 55.00                                                               |
| 56.00                                                                            | 05600 RADIOISOTOPE                         | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 56.00                                                               |
| 60.00                                                                            | 06000 LABORATORY                           | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 60.00                                                               |
| 60.01                                                                            | 06002 LABORATORY - HLA                     | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 60.01                                                               |
| 61.00                                                                            | 06100 PBP CLINICAL LAB SERVICES-PRGM ONLY  | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 61.00                                                               |
| 62.00                                                                            | 06200 WHOLE BLOOD & PACKED RED BLOOD CELLS | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 62.00                                                               |
| 64.00                                                                            | 06400 INTRAVENOUS THERAPY                  | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 64.00                                                               |
| 65.00                                                                            | 06500 RESPIRATORY THERAPY                  | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 65.00                                                               |
| 66.00                                                                            | 06600 PHYSICAL THERAPY                     | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 66.00                                                               |
| 67.00                                                                            | 06700 OCCUPATIONAL THERAPY                 | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 67.00                                                               |
| 68.00                                                                            | 06800 SPEECH PATHOLOGY                     | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 68.00                                                               |
| 69.00                                                                            | 06900 ELECTROCARDIOLOGY                    | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 69.00                                                               |
| 70.00                                                                            | 07000 ELECTROENCEPHALOGRAPHY               | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 70.00                                                               |
| 71.00                                                                            | 07100 MEDICAL SUPPLIES CHARGED TO PATIENTS | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 71.00                                                               |
| 72.00                                                                            | 07200 IMPL. DEV. CHARGED TO PATIENTS       | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 72.00                                                               |
| 73.00                                                                            | 07300 DRUGS CHARGED TO PATIENTS            | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 73.00                                                               |
| 74.00                                                                            | 07400 RENAL DIALYSIS                       | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 74.00                                                               |
| 76.00                                                                            | 03020 RENAL DIALYSIS ADULT                 | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 76.00                                                               |
| 76.01                                                                            | 03550 PSYCH DAY HOSPITAL                   | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 76.01                                                               |
|                                                                                  | OUTPATIENT SERVICE COST CENTERS            |                                                                                                                       |                                                                                                                         |  |                                             |                                                                     |
| 90.00                                                                            | 09000 CLINIC                               | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 90.00                                                               |
| 91.00                                                                            | 09100 EMERGENCY                            | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 91.00                                                               |
| 92.00                                                                            | 09200 OBSERVATION BEDS (NON-DISTINCT PART) | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 92.00                                                               |
| 92.01                                                                            | 09201 OBSERVATION BEDS (DISTINCT PART)     | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 92.01                                                               |
| 93.00                                                                            | 04040 BEHAVIORAL HEALTH                    | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 93.00                                                               |
|                                                                                  | OTHER REIMBURSABLE COST CENTERS            |                                                                                                                       |                                                                                                                         |  |                                             |                                                                     |
| 94.00                                                                            | 09400 HOME PROGRAM DIALYSIS                | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 94.00                                                               |
| 98.00                                                                            | 09850 OTHER REIMBURSABLE COST CENTERS      | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 98.00                                                               |
| 200.00                                                                           | Total (lines 50 through 199)               | 0                                                                                                                     | 0                                                                                                                       |  |                                             | 200.00                                                              |

| COMPUTATION OF INPATIENT OPERATING COST                               |                                                                                                                                                                                           | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-1<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |       |
|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|------------------------------------------------------------|-------|
| Title XVIII                                                           |                                                                                                                                                                                           | Hospital              |                                             | PPS                                                        |       |
| Cost Center Description                                               |                                                                                                                                                                                           |                       |                                             | 1.00                                                       |       |
| PART I - ALL PROVIDER COMPONENTS                                      |                                                                                                                                                                                           |                       |                                             |                                                            |       |
| INPATIENT DAYS                                                        |                                                                                                                                                                                           |                       |                                             |                                                            |       |
| 1.00                                                                  | Inpatient days (including private room days and swing-bed days, excluding newborn)                                                                                                        |                       |                                             | 111,934                                                    | 1.00  |
| 2.00                                                                  | Inpatient days (including private room days, excluding swing-bed and newborn days)                                                                                                        |                       |                                             | 111,934                                                    | 2.00  |
| 3.00                                                                  | Private room days (excluding swing-bed and observation bed days). If you have only private room days, do not complete this line.                                                          |                       |                                             | 96,682                                                     | 3.00  |
| 4.00                                                                  | Semi-private room days (excluding swing-bed and observation bed days)                                                                                                                     |                       |                                             | 9,388                                                      | 4.00  |
| 5.00                                                                  | Total swing-bed SNF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                    |                       |                                             | 0                                                          | 5.00  |
| 6.00                                                                  | Total swing-bed SNF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                             |                       |                                             | 0                                                          | 6.00  |
| 7.00                                                                  | Total swing-bed NF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                     |                       |                                             | 0                                                          | 7.00  |
| 8.00                                                                  | Total swing-bed NF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                              |                       |                                             | 0                                                          | 8.00  |
| 9.00                                                                  | Total inpatient days including private room days applicable to the Program (excluding swing-bed and newborn days)                                                                         |                       |                                             | 36,361                                                     | 9.00  |
| 10.00                                                                 | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) through December 31 of the cost reporting period (see instructions)                        |                       |                                             | 0                                                          | 10.00 |
| 11.00                                                                 | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)    |                       |                                             | 0                                                          | 11.00 |
| 12.00                                                                 | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) through December 31 of the cost reporting period                                        |                       |                                             | 0                                                          | 12.00 |
| 13.00                                                                 | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line) |                       |                                             | 0                                                          | 13.00 |
| 14.00                                                                 | Medically necessary private room days applicable to the Program (excluding swing-bed days)                                                                                                |                       |                                             | 33,953                                                     | 14.00 |
| 15.00                                                                 | Total nursery days (title V or XIX only)                                                                                                                                                  |                       |                                             | 0                                                          | 15.00 |
| 16.00                                                                 | Nursery days (title V or XIX only)                                                                                                                                                        |                       |                                             | 0                                                          | 16.00 |
| SWING BED ADJUSTMENT                                                  |                                                                                                                                                                                           |                       |                                             |                                                            |       |
| 17.00                                                                 | Medicare rate for swing-bed SNF services applicable to services through December 31 of the cost reporting period                                                                          |                       |                                             | 0.00                                                       | 17.00 |
| 18.00                                                                 | Medicare rate for swing-bed SNF services applicable to services after December 31 of the cost reporting period                                                                            |                       |                                             | 0.00                                                       | 18.00 |
| 19.00                                                                 | Medicaid rate for swing-bed NF services applicable to services through December 31 of the cost reporting period                                                                           |                       |                                             | 0.00                                                       | 19.00 |
| 20.00                                                                 | Medicaid rate for swing-bed NF services applicable to services after December 31 of the cost reporting period                                                                             |                       |                                             | 0.00                                                       | 20.00 |
| 21.00                                                                 | Total general inpatient routine service cost (see instructions)                                                                                                                           |                       |                                             | 146,041,014                                                | 21.00 |
| 22.00                                                                 | Swing-bed cost applicable to SNF type services through December 31 of the cost reporting period (line 5 x line 17)                                                                        |                       |                                             | 0                                                          | 22.00 |
| 23.00                                                                 | Swing-bed cost applicable to SNF type services after December 31 of the cost reporting period (line 6 x line 18)                                                                          |                       |                                             | 0                                                          | 23.00 |
| 24.00                                                                 | Swing-bed cost applicable to NF type services through December 31 of the cost reporting period (line 7 x line 19)                                                                         |                       |                                             | 0                                                          | 24.00 |
| 25.00                                                                 | Swing-bed cost applicable to NF type services after December 31 of the cost reporting period (line 8 x line 20)                                                                           |                       |                                             | 0                                                          | 25.00 |
| 26.00                                                                 | Total swing-bed cost (see instructions)                                                                                                                                                   |                       |                                             | 0                                                          | 26.00 |
| 27.00                                                                 | General inpatient routine service cost net of swing-bed cost (line 21 minus line 26)                                                                                                      |                       |                                             | 146,041,014                                                | 27.00 |
| PRIVATE ROOM DIFFERENTIAL ADJUSTMENT                                  |                                                                                                                                                                                           |                       |                                             |                                                            |       |
| 28.00                                                                 | General inpatient routine service charges (excluding swing-bed and observation bed charges)                                                                                               |                       |                                             | 254,687,726                                                | 28.00 |
| 29.00                                                                 | Private room charges (excluding swing-bed charges)                                                                                                                                        |                       |                                             | 223,717,845                                                | 29.00 |
| 30.00                                                                 | Semi-private room charges (excluding swing-bed charges)                                                                                                                                   |                       |                                             | 30,969,881                                                 | 30.00 |
| 31.00                                                                 | General inpatient routine service cost/charge ratio (line 27 ÷ line 28)                                                                                                                   |                       |                                             | 0.573412                                                   | 31.00 |
| 32.00                                                                 | Average private room per diem charge (line 29 ÷ line 3)                                                                                                                                   |                       |                                             | 2,313.96                                                   | 32.00 |
| 33.00                                                                 | Average semi-private room per diem charge (line 30 ÷ line 4)                                                                                                                              |                       |                                             | 3,298.88                                                   | 33.00 |
| 34.00                                                                 | Average per diem private room charge differential (line 32 minus line 33)(see instructions)                                                                                               |                       |                                             | 0.00                                                       | 34.00 |
| 35.00                                                                 | Average per diem private room cost differential (line 34 x line 31)                                                                                                                       |                       |                                             | 0.00                                                       | 35.00 |
| 36.00                                                                 | Private room cost differential adjustment (line 3 x line 35)                                                                                                                              |                       |                                             | 0                                                          | 36.00 |
| 37.00                                                                 | General inpatient routine service cost net of swing-bed cost and private room cost differential (line 27 minus line 36)                                                                   |                       |                                             | 146,041,014                                                | 37.00 |
| PART II - HOSPITAL AND SUBPROVIDERS ONLY                              |                                                                                                                                                                                           |                       |                                             |                                                            |       |
| PROGRAM INPATIENT OPERATING COST BEFORE PASS THROUGH COST ADJUSTMENTS |                                                                                                                                                                                           |                       |                                             |                                                            |       |
| 38.00                                                                 | Adjusted general inpatient routine service cost per diem (see instructions)                                                                                                               |                       |                                             | 1,304.71                                                   | 38.00 |
| 39.00                                                                 | Program general inpatient routine service cost (line 9 x line 38)                                                                                                                         |                       |                                             | 47,440,560                                                 | 39.00 |
| 40.00                                                                 | Medically necessary private room cost applicable to the Program (line 14 x line 35)                                                                                                       |                       |                                             | 0                                                          | 40.00 |
| 41.00                                                                 | Total Program general inpatient routine service cost (line 39 + line 40)                                                                                                                  |                       |                                             | 47,440,560                                                 | 41.00 |

## COMPUTATION OF INPATIENT OPERATING COST

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet D-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                                                       |                                                                                                                                                                                                                                                                 | Total<br>Inpatient Cost | Total<br>Inpatient Days | Average Per<br>Diem (col. 1 ÷<br>col. 2) | Hospital<br>Program Days | PPS<br>Program Cost<br>(col. 3 x col.<br>4) |       |
|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------|------------------------------------------|--------------------------|---------------------------------------------|-------|
|                                                                               |                                                                                                                                                                                                                                                                 | 1.00                    | 2.00                    | 3.00                                     | 4.00                     | 5.00                                        |       |
| 42.00                                                                         | NURSERY (title V & XIX only)                                                                                                                                                                                                                                    | 0                       | 0                       | 0.00                                     | 0                        | 0                                           | 42.00 |
| Intensive Care Type Inpatient Hospital Units                                  |                                                                                                                                                                                                                                                                 |                         |                         |                                          |                          |                                             |       |
| 43.00                                                                         | INTENSIVE CARE UNIT                                                                                                                                                                                                                                             |                         |                         |                                          |                          |                                             | 43.00 |
| 44.00                                                                         | CORONARY CARE UNIT                                                                                                                                                                                                                                              |                         |                         |                                          |                          |                                             | 44.00 |
| 45.00                                                                         | BURN INTENSIVE CARE UNIT                                                                                                                                                                                                                                        |                         |                         |                                          |                          |                                             | 45.00 |
| 46.00                                                                         | SURGICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                    | 33,339,714              | 16,585                  | 2,010.23                                 | 5,315                    | 10,684,372                                  | 46.00 |
| 47.00                                                                         | MEDICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                     | 36,934,406              | 17,456                  | 2,115.86                                 | 7,465                    | 15,794,895                                  | 47.00 |
| 47.01                                                                         | PEDIATRIC INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 10,966,889              | 4,555                   | 2,407.66                                 | 4                        | 9,631                                       | 47.01 |
| 47.02                                                                         | PREMATURE INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 25,628,210              | 15,751                  | 1,627.08                                 | 0                        | 0                                           | 47.02 |
| Cost Center Description                                                       |                                                                                                                                                                                                                                                                 |                         |                         |                                          |                          | 1.00                                        |       |
| 48.00                                                                         | Program inpatient ancillary service cost (Wkst. D-3, col. 3, line 200)                                                                                                                                                                                          |                         |                         |                                          |                          | 114,686,042                                 | 48.00 |
| 49.00                                                                         | Total Program inpatient costs (sum of lines 41 through 48)(see instructions)                                                                                                                                                                                    |                         |                         |                                          |                          | 188,615,500                                 | 49.00 |
| PASS THROUGH COST ADJUSTMENTS                                                 |                                                                                                                                                                                                                                                                 |                         |                         |                                          |                          |                                             |       |
| 50.00                                                                         | Pass through costs applicable to Program inpatient routine services (from Wkst. D, sum of Parts I and III)                                                                                                                                                      |                         |                         |                                          |                          | 8,868,239                                   | 50.00 |
| 51.00                                                                         | Pass through costs applicable to Program inpatient ancillary services (from Wkst. D, sum of Parts II and IV)                                                                                                                                                    |                         |                         |                                          |                          | 5,532,804                                   | 51.00 |
| 52.00                                                                         | Total Program excludable cost (sum of lines 50 and 51)                                                                                                                                                                                                          |                         |                         |                                          |                          | 14,401,043                                  | 52.00 |
| 53.00                                                                         | Total Program inpatient operating cost excluding capital related, non-physician anesthetist, and medical education costs (line 49 minus line 52)                                                                                                                |                         |                         |                                          |                          | 174,214,457                                 | 53.00 |
| TARGET AMOUNT AND LIMIT COMPUTATION                                           |                                                                                                                                                                                                                                                                 |                         |                         |                                          |                          |                                             |       |
| 54.00                                                                         | Program discharges                                                                                                                                                                                                                                              |                         |                         |                                          |                          | 0                                           | 54.00 |
| 55.00                                                                         | Target amount per discharge                                                                                                                                                                                                                                     |                         |                         |                                          |                          | 0.00                                        | 55.00 |
| 56.00                                                                         | Target amount (line 54 x line 55)                                                                                                                                                                                                                               |                         |                         |                                          |                          | 0                                           | 56.00 |
| 57.00                                                                         | Difference between adjusted inpatient operating cost and target amount (line 56 minus line 53)                                                                                                                                                                  |                         |                         |                                          |                          | 0                                           | 57.00 |
| 58.00                                                                         | Bonus payment (see instructions)                                                                                                                                                                                                                                |                         |                         |                                          |                          | 0                                           | 58.00 |
| 59.00                                                                         | Lesser of lines 53/54 or 55 from the cost reporting period ending 1996, updated and compounded by the market basket                                                                                                                                             |                         |                         |                                          |                          | 0.00                                        | 59.00 |
| 60.00                                                                         | Lesser of lines 53/54 or 55 from prior year cost report, updated by the market basket                                                                                                                                                                           |                         |                         |                                          |                          | 0.00                                        | 60.00 |
| 61.00                                                                         | If line 53/54 is less than the lower of lines 55, 59 or 60 enter the lesser of 50% of the amount by which operating costs (line 53) are less than expected costs (lines 54 x 60), or 1% of the target amount (line 56), otherwise enter zero (see instructions) |                         |                         |                                          |                          | 0                                           | 61.00 |
| 62.00                                                                         | Relief payment (see instructions)                                                                                                                                                                                                                               |                         |                         |                                          |                          | 0                                           | 62.00 |
| 63.00                                                                         | Allowable Inpatient cost plus incentive payment (see instructions)                                                                                                                                                                                              |                         |                         |                                          |                          | 0                                           | 63.00 |
| PROGRAM INPATIENT ROUTINE SWING BED COST                                      |                                                                                                                                                                                                                                                                 |                         |                         |                                          |                          |                                             |       |
| 64.00                                                                         | Medicare swing-bed SNF inpatient routine costs through December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                            |                         |                         |                                          |                          | 0                                           | 64.00 |
| 65.00                                                                         | Medicare swing-bed SNF inpatient routine costs after December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                              |                         |                         |                                          |                          | 0                                           | 65.00 |
| 66.00                                                                         | Total Medicare swing-bed SNF inpatient routine costs (line 64 plus line 65)(title XVIII only). For CAH (see instructions)                                                                                                                                       |                         |                         |                                          |                          | 0                                           | 66.00 |
| 67.00                                                                         | Title V or XIX swing-bed NF inpatient routine costs through December 31 of the cost reporting period (line 12 x line 19)                                                                                                                                        |                         |                         |                                          |                          | 0                                           | 67.00 |
| 68.00                                                                         | Title V or XIX swing-bed NF inpatient routine costs after December 31 of the cost reporting period (line 13 x line 20)                                                                                                                                          |                         |                         |                                          |                          | 0                                           | 68.00 |
| 69.00                                                                         | Total title V or XIX swing-bed NF inpatient routine costs (line 67 + line 68)                                                                                                                                                                                   |                         |                         |                                          |                          | 0                                           | 69.00 |
| PART III - SKILLED NURSING FACILITY, OTHER NURSING FACILITY, AND ICF/IID ONLY |                                                                                                                                                                                                                                                                 |                         |                         |                                          |                          |                                             |       |
| 70.00                                                                         | Skilled nursing facility/other nursing facility/ICF/IID routine service cost (line 37)                                                                                                                                                                          |                         |                         |                                          |                          |                                             | 70.00 |
| 71.00                                                                         | Adjusted general inpatient routine service cost per diem (line 70 ÷ line 2)                                                                                                                                                                                     |                         |                         |                                          |                          |                                             | 71.00 |
| 72.00                                                                         | Program routine service cost (line 9 x line 71)                                                                                                                                                                                                                 |                         |                         |                                          |                          |                                             | 72.00 |
| 73.00                                                                         | Medically necessary private room cost applicable to Program (line 14 x line 35)                                                                                                                                                                                 |                         |                         |                                          |                          |                                             | 73.00 |
| 74.00                                                                         | Total Program general inpatient routine service costs (line 72 + line 73)                                                                                                                                                                                       |                         |                         |                                          |                          |                                             | 74.00 |
| 75.00                                                                         | Capital-related cost allocated to inpatient routine service costs (from Worksheet B, Part II, column 26, line 45)                                                                                                                                               |                         |                         |                                          |                          |                                             | 75.00 |
| 76.00                                                                         | Per diem capital-related costs (line 75 ÷ line 2)                                                                                                                                                                                                               |                         |                         |                                          |                          |                                             | 76.00 |
| 77.00                                                                         | Program capital-related costs (line 9 x line 76)                                                                                                                                                                                                                |                         |                         |                                          |                          |                                             | 77.00 |
| 78.00                                                                         | Inpatient routine service cost (line 74 minus line 77)                                                                                                                                                                                                          |                         |                         |                                          |                          |                                             | 78.00 |
| 79.00                                                                         | Aggregate charges to beneficiaries for excess costs (from provider records)                                                                                                                                                                                     |                         |                         |                                          |                          |                                             | 79.00 |
| 80.00                                                                         | Total Program routine service costs for comparison to the cost limitation (line 78 minus line 79)                                                                                                                                                               |                         |                         |                                          |                          |                                             | 80.00 |
| 81.00                                                                         | Inpatient routine service cost per diem limitation                                                                                                                                                                                                              |                         |                         |                                          |                          |                                             | 81.00 |
| 82.00                                                                         | Inpatient routine service cost limitation (line 9 x line 81)                                                                                                                                                                                                    |                         |                         |                                          |                          |                                             | 82.00 |
| 83.00                                                                         | Reasonable inpatient routine service costs (see instructions)                                                                                                                                                                                                   |                         |                         |                                          |                          |                                             | 83.00 |
| 84.00                                                                         | Program inpatient ancillary services (see instructions)                                                                                                                                                                                                         |                         |                         |                                          |                          |                                             | 84.00 |
| 85.00                                                                         | Utilization review - physician compensation (see instructions)                                                                                                                                                                                                  |                         |                         |                                          |                          |                                             | 85.00 |
| 86.00                                                                         | Total Program inpatient operating costs (sum of lines 83 through 85)                                                                                                                                                                                            |                         |                         |                                          |                          |                                             | 86.00 |
| PART IV - COMPUTATION OF OBSERVATION BED PASS THROUGH COST                    |                                                                                                                                                                                                                                                                 |                         |                         |                                          |                          |                                             |       |
| 87.00                                                                         | Total observation bed days (see instructions)                                                                                                                                                                                                                   |                         |                         |                                          |                          | 5,864                                       | 87.00 |
| 88.00                                                                         | Adjusted general inpatient routine cost per diem (line 27 ÷ line 2)                                                                                                                                                                                             |                         |                         |                                          |                          | 1,304.71                                    | 88.00 |
| 89.00                                                                         | Observation bed cost (line 87 x line 88) (see instructions)                                                                                                                                                                                                     |                         |                         |                                          |                          | 7,650,819                                   | 89.00 |

## COMPUTATION OF INPATIENT OPERATING COST

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet D-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                          |                             | Title XVIII                    |                        | Hospital                                           |                                                                                       | PPS     |       |
|--------------------------------------------------|-----------------------------|--------------------------------|------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------|---------|-------|
|                                                  |                             | Routine Cost<br>(from line 21) | column 1 ÷<br>column 2 | Total<br>Observation<br>Bed Cost (from<br>line 89) | Observation<br>Bed Pass<br>Through Cost<br>(col. 3 x col.<br>4) (see<br>instructions) |         |       |
|                                                  |                             | 1.00                           | 2.00                   | 3.00                                               | 4.00                                                                                  | 5.00    |       |
| COMPUTATION OF OBSERVATION BED PASS THROUGH COST |                             |                                |                        |                                                    |                                                                                       |         |       |
| 90.00                                            | Capital-related cost        | 14,257,790                     | 146,041,014            | 0.097629                                           | 7,650,819                                                                             | 746,942 | 90.00 |
| 91.00                                            | Nursing School cost         | 6,375,282                      | 146,041,014            | 0.043654                                           | 7,650,819                                                                             | 333,989 | 91.00 |
| 92.00                                            | Allied health cost          | 402,932                        | 146,041,014            | 0.002759                                           | 7,650,819                                                                             | 21,109  | 92.00 |
| 93.00                                            | All other Medical Education | 0                              | 146,041,014            | 0.000000                                           | 7,650,819                                                                             | 0       | 93.00 |

| COMPUTATION OF INPATIENT OPERATING COST                               |                                                                                                                                                                                           | Provider CCN: 14-0119<br>Component CCN: 14-S119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-1<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|------------------------------------------------------------|
|                                                                       |                                                                                                                                                                                           | Title XVIII                                     | Subprovider -<br>IPF                        | PPS                                                        |
| Cost Center Description                                               |                                                                                                                                                                                           |                                                 | 1.00                                        |                                                            |
| PART I - ALL PROVIDER COMPONENTS                                      |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| INPATIENT DAYS                                                        |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 1.00                                                                  | Inpatient days (including private room days and swing-bed days, excluding newborn)                                                                                                        |                                                 | 7,008                                       | 1.00                                                       |
| 2.00                                                                  | Inpatient days (including private room days, excluding swing-bed and newborn days)                                                                                                        |                                                 | 7,008                                       | 2.00                                                       |
| 3.00                                                                  | Private room days (excluding swing-bed and observation bed days). If you have only private room days, do not complete this line.                                                          |                                                 | 6,630                                       | 3.00                                                       |
| 4.00                                                                  | Semi-private room days (excluding swing-bed and observation bed days)                                                                                                                     |                                                 | 378                                         | 4.00                                                       |
| 5.00                                                                  | Total swing-bed SNF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                    |                                                 | 0                                           | 5.00                                                       |
| 6.00                                                                  | Total swing-bed SNF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                             |                                                 | 0                                           | 6.00                                                       |
| 7.00                                                                  | Total swing-bed NF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                     |                                                 | 0                                           | 7.00                                                       |
| 8.00                                                                  | Total swing-bed NF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                              |                                                 | 0                                           | 8.00                                                       |
| 9.00                                                                  | Total inpatient days including private room days applicable to the Program (excluding swing-bed and newborn days)                                                                         |                                                 | 1,714                                       | 9.00                                                       |
| 10.00                                                                 | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) through December 31 of the cost reporting period (see instructions)                        |                                                 | 0                                           | 10.00                                                      |
| 11.00                                                                 | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)    |                                                 | 0                                           | 11.00                                                      |
| 12.00                                                                 | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) through December 31 of the cost reporting period                                        |                                                 | 0                                           | 12.00                                                      |
| 13.00                                                                 | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line) |                                                 | 0                                           | 13.00                                                      |
| 14.00                                                                 | Medically necessary private room days applicable to the Program (excluding swing-bed days)                                                                                                |                                                 | 1,738                                       | 14.00                                                      |
| 15.00                                                                 | Total nursery days (title V or XIX only)                                                                                                                                                  |                                                 | 0                                           | 15.00                                                      |
| 16.00                                                                 | Nursery days (title V or XIX only)                                                                                                                                                        |                                                 | 0                                           | 16.00                                                      |
| SWING BED ADJUSTMENT                                                  |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 17.00                                                                 | Medicare rate for swing-bed SNF services applicable to services through December 31 of the cost reporting period                                                                          |                                                 | 0.00                                        | 17.00                                                      |
| 18.00                                                                 | Medicare rate for swing-bed SNF services applicable to services after December 31 of the cost reporting period                                                                            |                                                 | 0.00                                        | 18.00                                                      |
| 19.00                                                                 | Medicaid rate for swing-bed NF services applicable to services through December 31 of the cost reporting period                                                                           |                                                 | 0.00                                        | 19.00                                                      |
| 20.00                                                                 | Medicaid rate for swing-bed NF services applicable to services after December 31 of the cost reporting period                                                                             |                                                 | 0.00                                        | 20.00                                                      |
| 21.00                                                                 | Total general inpatient routine service cost (see instructions)                                                                                                                           |                                                 | 11,257,028                                  | 21.00                                                      |
| 22.00                                                                 | Swing-bed cost applicable to SNF type services through December 31 of the cost reporting period (line 5 x line 17)                                                                        |                                                 | 0                                           | 22.00                                                      |
| 23.00                                                                 | Swing-bed cost applicable to SNF type services after December 31 of the cost reporting period (line 6 x line 18)                                                                          |                                                 | 0                                           | 23.00                                                      |
| 24.00                                                                 | Swing-bed cost applicable to NF type services through December 31 of the cost reporting period (line 7 x line 19)                                                                         |                                                 | 0                                           | 24.00                                                      |
| 25.00                                                                 | Swing-bed cost applicable to NF type services after December 31 of the cost reporting period (line 8 x line 20)                                                                           |                                                 | 0                                           | 25.00                                                      |
| 26.00                                                                 | Total swing-bed cost (see instructions)                                                                                                                                                   |                                                 | 0                                           | 26.00                                                      |
| 27.00                                                                 | General inpatient routine service cost net of swing-bed cost (line 21 minus line 26)                                                                                                      |                                                 | 11,257,028                                  | 27.00                                                      |
| PRIVATE ROOM DIFFERENTIAL ADJUSTMENT                                  |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 28.00                                                                 | General inpatient routine service charges (excluding swing-bed and observation bed charges)                                                                                               |                                                 | 16,288,765                                  | 28.00                                                      |
| 29.00                                                                 | Private room charges (excluding swing-bed charges)                                                                                                                                        |                                                 | 15,397,975                                  | 29.00                                                      |
| 30.00                                                                 | Semi-private room charges (excluding swing-bed charges)                                                                                                                                   |                                                 | 890,790                                     | 30.00                                                      |
| 31.00                                                                 | General inpatient routine service cost/charge ratio (line 27 ÷ line 28)                                                                                                                   |                                                 | 0.691092                                    | 31.00                                                      |
| 32.00                                                                 | Average private room per diem charge (line 29 ÷ line 3)                                                                                                                                   |                                                 | 2,322.47                                    | 32.00                                                      |
| 33.00                                                                 | Average semi-private room per diem charge (line 30 ÷ line 4)                                                                                                                              |                                                 | 2,356.59                                    | 33.00                                                      |
| 34.00                                                                 | Average per diem private room charge differential (line 32 minus line 33)(see instructions)                                                                                               |                                                 | 0.00                                        | 34.00                                                      |
| 35.00                                                                 | Average per diem private room cost differential (line 34 x line 31)                                                                                                                       |                                                 | 0.00                                        | 35.00                                                      |
| 36.00                                                                 | Private room cost differential adjustment (line 3 x line 35)                                                                                                                              |                                                 | 0                                           | 36.00                                                      |
| 37.00                                                                 | General inpatient routine service cost net of swing-bed cost and private room cost differential (line 27 minus line 36)                                                                   |                                                 | 11,257,028                                  | 37.00                                                      |
| PART II - HOSPITAL AND SUBPROVIDERS ONLY                              |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| PROGRAM INPATIENT OPERATING COST BEFORE PASS THROUGH COST ADJUSTMENTS |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 38.00                                                                 | Adjusted general inpatient routine service cost per diem (see instructions)                                                                                                               |                                                 | 1,606.31                                    | 38.00                                                      |
| 39.00                                                                 | Program general inpatient routine service cost (line 9 x line 38)                                                                                                                         |                                                 | 2,753,215                                   | 39.00                                                      |
| 40.00                                                                 | Medically necessary private room cost applicable to the Program (line 14 x line 35)                                                                                                       |                                                 | 0                                           | 40.00                                                      |
| 41.00                                                                 | Total Program general inpatient routine service cost (line 39 + line 40)                                                                                                                  |                                                 | 2,753,215                                   | 41.00                                                      |

| COMPUTATION OF INPATIENT OPERATING COST                                                                                                                                                                                                                               |                         |                         | Provider CCN: 14-0119                    | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-1                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------|------------------------------------------|---------------------------------------------|-------------------------------------------|
|                                                                                                                                                                                                                                                                       |                         |                         | Component CCN: 14-S119                   |                                             | Date/Time Prepared:<br>11/24/2019 4:22 pm |
|                                                                                                                                                                                                                                                                       |                         |                         | Title XVIII                              | Subprovider -<br>IPF                        | PPS                                       |
| Cost Center Description                                                                                                                                                                                                                                               | Total<br>Inpatient Cost | Total<br>Inpatient Days | Average Per<br>Diem (col. 1 ÷<br>col. 2) | Program Days                                | Program Cost<br>(col. 3 x col.<br>4)      |
|                                                                                                                                                                                                                                                                       | 1.00                    | 2.00                    | 3.00                                     | 4.00                                        | 5.00                                      |
| 42.00 NURSERY (title V & XIX only)                                                                                                                                                                                                                                    | 0                       | 0                       | 0.00                                     | 0                                           | 0                                         |
| Intensive Care Type Inpatient Hospital Units                                                                                                                                                                                                                          |                         |                         |                                          |                                             |                                           |
| 43.00 INTENSIVE CARE UNIT                                                                                                                                                                                                                                             |                         |                         |                                          |                                             | 43.00                                     |
| 44.00 CORONARY CARE UNIT                                                                                                                                                                                                                                              |                         |                         |                                          |                                             | 44.00                                     |
| 45.00 BURN INTENSIVE CARE UNIT                                                                                                                                                                                                                                        |                         |                         |                                          |                                             | 45.00                                     |
| 46.00 SURGICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                    | 0                       | 0                       | 0.00                                     | 0                                           | 46.00                                     |
| 47.00 MEDICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                     | 0                       | 0                       | 0.00                                     | 0                                           | 47.00                                     |
| 47.01 PEDIATRIC INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 0                       | 0                       | 0.00                                     | 0                                           | 47.01                                     |
| 47.02 PREMATURE INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 0                       | 0                       | 0.00                                     | 0                                           | 47.02                                     |
| Cost Center Description                                                                                                                                                                                                                                               |                         |                         |                                          |                                             |                                           |
|                                                                                                                                                                                                                                                                       |                         |                         |                                          |                                             | 1.00                                      |
| 48.00 Program inpatient ancillary service cost (Wkst. D-3, col. 3, line 200)                                                                                                                                                                                          |                         |                         |                                          |                                             | 450,955                                   |
| 49.00 Total Program inpatient costs (sum of lines 41 through 48)(see instructions)                                                                                                                                                                                    |                         |                         |                                          |                                             | 3,204,170                                 |
| PASS THROUGH COST ADJUSTMENTS                                                                                                                                                                                                                                         |                         |                         |                                          |                                             |                                           |
| 50.00 Pass through costs applicable to Program inpatient routine services (from Wkst. D, sum of Parts I and III)                                                                                                                                                      |                         |                         |                                          |                                             | 484,154                                   |
| 51.00 Pass through costs applicable to Program inpatient ancillary services (from Wkst. D, sum of Parts II and IV)                                                                                                                                                    |                         |                         |                                          |                                             | 32,885                                    |
| 52.00 Total Program excludable cost (sum of lines 50 and 51)                                                                                                                                                                                                          |                         |                         |                                          |                                             | 517,039                                   |
| 53.00 Total Program inpatient operating cost excluding capital related, non-physician anesthetist, and medical education costs (line 49 minus line 52)                                                                                                                |                         |                         |                                          |                                             | 2,687,131                                 |
| TARGET AMOUNT AND LIMIT COMPUTATION                                                                                                                                                                                                                                   |                         |                         |                                          |                                             |                                           |
| 54.00 Program discharges                                                                                                                                                                                                                                              |                         |                         |                                          |                                             | 0                                         |
| 55.00 Target amount per discharge                                                                                                                                                                                                                                     |                         |                         |                                          |                                             | 0.00                                      |
| 56.00 Target amount (line 54 x line 55)                                                                                                                                                                                                                               |                         |                         |                                          |                                             | 0                                         |
| 57.00 Difference between adjusted inpatient operating cost and target amount (line 56 minus line 53)                                                                                                                                                                  |                         |                         |                                          |                                             | 0                                         |
| 58.00 Bonus payment (see instructions)                                                                                                                                                                                                                                |                         |                         |                                          |                                             | 0                                         |
| 59.00 Lesser of lines 53/54 or 55 from the cost reporting period ending 1996, updated and compounded by the market basket                                                                                                                                             |                         |                         |                                          |                                             | 0.00                                      |
| 60.00 Lesser of lines 53/54 or 55 from prior year cost report, updated by the market basket                                                                                                                                                                           |                         |                         |                                          |                                             | 0.00                                      |
| 61.00 If line 53/54 is less than the lower of lines 55, 59 or 60 enter the lesser of 50% of the amount by which operating costs (line 53) are less than expected costs (lines 54 x 60), or 1% of the target amount (line 56), otherwise enter zero (see instructions) |                         |                         |                                          |                                             | 0                                         |
| 62.00 Relief payment (see instructions)                                                                                                                                                                                                                               |                         |                         |                                          |                                             | 0                                         |
| 63.00 Allowable Inpatient cost plus incentive payment (see instructions)                                                                                                                                                                                              |                         |                         |                                          |                                             | 0                                         |
| PROGRAM INPATIENT ROUTINE SWING BED COST                                                                                                                                                                                                                              |                         |                         |                                          |                                             |                                           |
| 64.00 Medicare swing-bed SNF inpatient routine costs through December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                            |                         |                         |                                          |                                             | 0                                         |
| 65.00 Medicare swing-bed SNF inpatient routine costs after December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                              |                         |                         |                                          |                                             | 0                                         |
| 66.00 Total Medicare swing-bed SNF inpatient routine costs (line 64 plus line 65)(title XVIII only). For CAH (see instructions)                                                                                                                                       |                         |                         |                                          |                                             | 0                                         |
| 67.00 Title V or XIX swing-bed NF inpatient routine costs through December 31 of the cost reporting period (line 12 x line 19)                                                                                                                                        |                         |                         |                                          |                                             | 0                                         |
| 68.00 Title V or XIX swing-bed NF inpatient routine costs after December 31 of the cost reporting period (line 13 x line 20)                                                                                                                                          |                         |                         |                                          |                                             | 0                                         |
| 69.00 Total title V or XIX swing-bed NF inpatient routine costs (line 67 + line 68)                                                                                                                                                                                   |                         |                         |                                          |                                             | 0                                         |
| PART III - SKILLED NURSING FACILITY, OTHER NURSING FACILITY, AND ICF/IID ONLY                                                                                                                                                                                         |                         |                         |                                          |                                             |                                           |
| 70.00 Skilled nursing facility/other nursing facility/ICF/IID routine service cost (line 37)                                                                                                                                                                          |                         |                         |                                          |                                             | 70.00                                     |
| 71.00 Adjusted general inpatient routine service cost per diem (line 70 ÷ line 2)                                                                                                                                                                                     |                         |                         |                                          |                                             | 71.00                                     |
| 72.00 Program routine service cost (line 9 x line 71)                                                                                                                                                                                                                 |                         |                         |                                          |                                             | 72.00                                     |
| 73.00 Medically necessary private room cost applicable to Program (line 14 x line 35)                                                                                                                                                                                 |                         |                         |                                          |                                             | 73.00                                     |
| 74.00 Total Program general inpatient routine service costs (line 72 + line 73)                                                                                                                                                                                       |                         |                         |                                          |                                             | 74.00                                     |
| 75.00 Capital-related cost allocated to inpatient routine service costs (from Worksheet B, Part II, column 26, line 45)                                                                                                                                               |                         |                         |                                          |                                             | 75.00                                     |
| 76.00 Per diem capital-related costs (line 75 ÷ line 2)                                                                                                                                                                                                               |                         |                         |                                          |                                             | 76.00                                     |
| 77.00 Program capital-related costs (line 9 x line 76)                                                                                                                                                                                                                |                         |                         |                                          |                                             | 77.00                                     |
| 78.00 Inpatient routine service cost (line 74 minus line 77)                                                                                                                                                                                                          |                         |                         |                                          |                                             | 78.00                                     |
| 79.00 Aggregate charges to beneficiaries for excess costs (from provider records)                                                                                                                                                                                     |                         |                         |                                          |                                             | 79.00                                     |
| 80.00 Total Program routine service costs for comparison to the cost limitation (line 78 minus line 79)                                                                                                                                                               |                         |                         |                                          |                                             | 80.00                                     |
| 81.00 Inpatient routine service cost per diem limitation                                                                                                                                                                                                              |                         |                         |                                          |                                             | 81.00                                     |
| 82.00 Inpatient routine service cost limitation (line 9 x line 81)                                                                                                                                                                                                    |                         |                         |                                          |                                             | 82.00                                     |
| 83.00 Reasonable inpatient routine service costs (see instructions)                                                                                                                                                                                                   |                         |                         |                                          |                                             | 83.00                                     |
| 84.00 Program inpatient ancillary services (see instructions)                                                                                                                                                                                                         |                         |                         |                                          |                                             | 84.00                                     |
| 85.00 Utilization review - physician compensation (see instructions)                                                                                                                                                                                                  |                         |                         |                                          |                                             | 85.00                                     |
| 86.00 Total Program inpatient operating costs (sum of lines 83 through 85)                                                                                                                                                                                            |                         |                         |                                          |                                             | 86.00                                     |
| PART IV - COMPUTATION OF OBSERVATION BED PASS THROUGH COST                                                                                                                                                                                                            |                         |                         |                                          |                                             |                                           |
| 87.00 Total observation bed days (see instructions)                                                                                                                                                                                                                   |                         |                         |                                          |                                             | 0                                         |
| 88.00 Adjusted general inpatient routine cost per diem (line 27 ÷ line 2)                                                                                                                                                                                             |                         |                         |                                          |                                             | 0.00                                      |
| 89.00 Observation bed cost (line 87 x line 88) (see instructions)                                                                                                                                                                                                     |                         |                         |                                          |                                             | 0                                         |

| COMPUTATION OF INPATIENT OPERATING COST          |                             | Provider CCN: 14-0119<br>Component CCN: 14-S119 |                                | Period:<br>From 07/01/2018<br>To 06/30/2019 |                                                    | Worksheet D-1<br>Date/Time Prepared:<br>11/24/2019 4:22 pm                            |       |
|--------------------------------------------------|-----------------------------|-------------------------------------------------|--------------------------------|---------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------|-------|
|                                                  |                             | Title XVIII                                     |                                | Subprovider -<br>IPF                        |                                                    | PPS                                                                                   |       |
| Cost Center Description                          |                             | Cost                                            | Routine Cost<br>(from line 21) | column 1 ÷<br>column 2                      | Total<br>Observation<br>Bed Cost (from<br>line 89) | Observation<br>Bed Pass<br>Through Cost<br>(col. 3 x col.<br>4) (see<br>instructions) |       |
|                                                  |                             | 1.00                                            | 2.00                           | 3.00                                        | 4.00                                               | 5.00                                                                                  |       |
| COMPUTATION OF OBSERVATION BED PASS THROUGH COST |                             |                                                 |                                |                                             |                                                    |                                                                                       |       |
| 90.00                                            | Capital-related cost        | 1,285,848                                       | 11,257,028                     | 0.114226                                    | 0                                                  | 0                                                                                     | 90.00 |
| 91.00                                            | Nursing School cost         | 662,140                                         | 11,257,028                     | 0.058820                                    | 0                                                  | 0                                                                                     | 91.00 |
| 92.00                                            | Allied health cost          | 31,548                                          | 11,257,028                     | 0.002803                                    | 0                                                  | 0                                                                                     | 92.00 |
| 93.00                                            | All other Medical Education | 0                                               | 11,257,028                     | 0.000000                                    | 0                                                  | 0                                                                                     | 93.00 |

| COMPUTATION OF INPATIENT OPERATING COST                                      |                                                                                                                                                                                           | Provider CCN: 14-0119<br>Component CCN: 14-T119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-1<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|------------------------------------------------------------|
|                                                                              |                                                                                                                                                                                           | Title XVIII                                     | Subprovider -<br>IRF                        | PPS                                                        |
| Cost Center Description                                                      |                                                                                                                                                                                           |                                                 | 1.00                                        |                                                            |
| <b>PART I - ALL PROVIDER COMPONENTS</b>                                      |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| <b>INPATIENT DAYS</b>                                                        |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 1.00                                                                         | Inpatient days (including private room days and swing-bed days, excluding newborn)                                                                                                        |                                                 | 9,226                                       | 1.00                                                       |
| 2.00                                                                         | Inpatient days (including private room days, excluding swing-bed and newborn days)                                                                                                        |                                                 | 9,226                                       | 2.00                                                       |
| 3.00                                                                         | Private room days (excluding swing-bed and observation bed days). If you have only private room days, do not complete this line.                                                          |                                                 | 6,964                                       | 3.00                                                       |
| 4.00                                                                         | Semi-private room days (excluding swing-bed and observation bed days)                                                                                                                     |                                                 | 2,262                                       | 4.00                                                       |
| 5.00                                                                         | Total swing-bed SNF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                    |                                                 | 0                                           | 5.00                                                       |
| 6.00                                                                         | Total swing-bed SNF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                             |                                                 | 0                                           | 6.00                                                       |
| 7.00                                                                         | Total swing-bed NF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                     |                                                 | 0                                           | 7.00                                                       |
| 8.00                                                                         | Total swing-bed NF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                              |                                                 | 0                                           | 8.00                                                       |
| 9.00                                                                         | Total inpatient days including private room days applicable to the Program (excluding swing-bed and newborn days)                                                                         |                                                 | 3,805                                       | 9.00                                                       |
| 10.00                                                                        | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) through December 31 of the cost reporting period (see instructions)                        |                                                 | 0                                           | 10.00                                                      |
| 11.00                                                                        | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)    |                                                 | 0                                           | 11.00                                                      |
| 12.00                                                                        | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) through December 31 of the cost reporting period                                        |                                                 | 0                                           | 12.00                                                      |
| 13.00                                                                        | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line) |                                                 | 0                                           | 13.00                                                      |
| 14.00                                                                        | Medically necessary private room days applicable to the Program (excluding swing-bed days)                                                                                                |                                                 | 3,025                                       | 14.00                                                      |
| 15.00                                                                        | Total nursery days (title V or XIX only)                                                                                                                                                  |                                                 | 0                                           | 15.00                                                      |
| 16.00                                                                        | Nursery days (title V or XIX only)                                                                                                                                                        |                                                 | 0                                           | 16.00                                                      |
| <b>SWING BED ADJUSTMENT</b>                                                  |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 17.00                                                                        | Medicare rate for swing-bed SNF services applicable to services through December 31 of the cost reporting period                                                                          |                                                 | 0.00                                        | 17.00                                                      |
| 18.00                                                                        | Medicare rate for swing-bed SNF services applicable to services after December 31 of the cost reporting period                                                                            |                                                 | 0.00                                        | 18.00                                                      |
| 19.00                                                                        | Medicaid rate for swing-bed NF services applicable to services through December 31 of the cost reporting period                                                                           |                                                 | 0.00                                        | 19.00                                                      |
| 20.00                                                                        | Medicaid rate for swing-bed NF services applicable to services after December 31 of the cost reporting period                                                                             |                                                 | 0.00                                        | 20.00                                                      |
| 21.00                                                                        | Total general inpatient routine service cost (see instructions)                                                                                                                           |                                                 | 10,804,318                                  | 21.00                                                      |
| 22.00                                                                        | Swing-bed cost applicable to SNF type services through December 31 of the cost reporting period (line 5 x line 17)                                                                        |                                                 | 0                                           | 22.00                                                      |
| 23.00                                                                        | Swing-bed cost applicable to SNF type services after December 31 of the cost reporting period (line 6 x line 18)                                                                          |                                                 | 0                                           | 23.00                                                      |
| 24.00                                                                        | Swing-bed cost applicable to NF type services through December 31 of the cost reporting period (line 7 x line 19)                                                                         |                                                 | 0                                           | 24.00                                                      |
| 25.00                                                                        | Swing-bed cost applicable to NF type services after December 31 of the cost reporting period (line 8 x line 20)                                                                           |                                                 | 0                                           | 25.00                                                      |
| 26.00                                                                        | Total swing-bed cost (see instructions)                                                                                                                                                   |                                                 | 0                                           | 26.00                                                      |
| 27.00                                                                        | General inpatient routine service cost net of swing-bed cost (line 21 minus line 26)                                                                                                      |                                                 | 10,804,318                                  | 27.00                                                      |
| <b>PRIVATE ROOM DIFFERENTIAL ADJUSTMENT</b>                                  |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 28.00                                                                        | General inpatient routine service charges (excluding swing-bed and observation bed charges)                                                                                               |                                                 | 21,358,190                                  | 28.00                                                      |
| 29.00                                                                        | Private room charges (excluding swing-bed charges)                                                                                                                                        |                                                 | 16,121,660                                  | 29.00                                                      |
| 30.00                                                                        | Semi-private room charges (excluding swing-bed charges)                                                                                                                                   |                                                 | 5,236,530                                   | 30.00                                                      |
| 31.00                                                                        | General inpatient routine service cost/charge ratio (line 27 ÷ line 28)                                                                                                                   |                                                 | 0.505863                                    | 31.00                                                      |
| 32.00                                                                        | Average private room per diem charge (line 29 ÷ line 3)                                                                                                                                   |                                                 | 2,315.00                                    | 32.00                                                      |
| 33.00                                                                        | Average semi-private room per diem charge (line 30 ÷ line 4)                                                                                                                              |                                                 | 2,315.00                                    | 33.00                                                      |
| 34.00                                                                        | Average per diem private room charge differential (line 32 minus line 33)(see instructions)                                                                                               |                                                 | 0.00                                        | 34.00                                                      |
| 35.00                                                                        | Average per diem private room cost differential (line 34 x line 31)                                                                                                                       |                                                 | 0.00                                        | 35.00                                                      |
| 36.00                                                                        | Private room cost differential adjustment (line 3 x line 35)                                                                                                                              |                                                 | 0                                           | 36.00                                                      |
| 37.00                                                                        | General inpatient routine service cost net of swing-bed cost and private room cost differential (line 27 minus line 36)                                                                   |                                                 | 10,804,318                                  | 37.00                                                      |
| <b>PART II - HOSPITAL AND SUBPROVIDERS ONLY</b>                              |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| <b>PROGRAM INPATIENT OPERATING COST BEFORE PASS THROUGH COST ADJUSTMENTS</b> |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 38.00                                                                        | Adjusted general inpatient routine service cost per diem (see instructions)                                                                                                               |                                                 | 1,171.07                                    | 38.00                                                      |
| 39.00                                                                        | Program general inpatient routine service cost (line 9 x line 38)                                                                                                                         |                                                 | 4,455,921                                   | 39.00                                                      |
| 40.00                                                                        | Medically necessary private room cost applicable to the Program (line 14 x line 35)                                                                                                       |                                                 | 0                                           | 40.00                                                      |
| 41.00                                                                        | Total Program general inpatient routine service cost (line 39 + line 40)                                                                                                                  |                                                 | 4,455,921                                   | 41.00                                                      |

| COMPUTATION OF INPATIENT OPERATING COST                                                                                                                                                                                                                               |                         |                         | Provider CCN: 14-0119                    | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-1                             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|-------------------------|------------------------------------------|---------------------------------------------|-------------------------------------------|
|                                                                                                                                                                                                                                                                       |                         |                         | Component CCN: 14-T119                   |                                             | Date/Time Prepared:<br>11/24/2019 4:22 pm |
|                                                                                                                                                                                                                                                                       |                         |                         | Title XVIII                              | Subprovider -<br>IRF                        | PPS                                       |
| Cost Center Description                                                                                                                                                                                                                                               | Total<br>Inpatient Cost | Total<br>Inpatient Days | Average Per<br>Diem (col. 1 ÷<br>col. 2) | Program Days                                | Program Cost<br>(col. 3 x col.<br>4)      |
|                                                                                                                                                                                                                                                                       | 1.00                    | 2.00                    | 3.00                                     | 4.00                                        | 5.00                                      |
| 42.00 NURSERY (title V & XIX only)                                                                                                                                                                                                                                    | 0                       | 0                       | 0.00                                     | 0                                           | 0                                         |
| Intensive Care Type Inpatient Hospital Units                                                                                                                                                                                                                          |                         |                         |                                          |                                             |                                           |
| 43.00 INTENSIVE CARE UNIT                                                                                                                                                                                                                                             |                         |                         |                                          |                                             | 43.00                                     |
| 44.00 CORONARY CARE UNIT                                                                                                                                                                                                                                              |                         |                         |                                          |                                             | 44.00                                     |
| 45.00 BURN INTENSIVE CARE UNIT                                                                                                                                                                                                                                        |                         |                         |                                          |                                             | 45.00                                     |
| 46.00 SURGICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                    | 0                       | 0                       | 0.00                                     | 0                                           | 46.00                                     |
| 47.00 MEDICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                     | 0                       | 0                       | 0.00                                     | 0                                           | 47.00                                     |
| 47.01 PEDIATRIC INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 0                       | 0                       | 0.00                                     | 0                                           | 47.01                                     |
| 47.02 PREMATURE INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 0                       | 0                       | 0.00                                     | 0                                           | 47.02                                     |
| Cost Center Description                                                                                                                                                                                                                                               |                         |                         |                                          |                                             |                                           |
|                                                                                                                                                                                                                                                                       |                         |                         |                                          |                                             | 1.00                                      |
| 48.00 Program inpatient ancillary service cost (Wkst. D-3, col. 3, line 200)                                                                                                                                                                                          |                         |                         |                                          |                                             | 2,583,480                                 |
| 49.00 Total Program inpatient costs (sum of lines 41 through 48)(see instructions)                                                                                                                                                                                    |                         |                         |                                          |                                             | 7,039,401                                 |
| PASS THROUGH COST ADJUSTMENTS                                                                                                                                                                                                                                         |                         |                         |                                          |                                             |                                           |
| 50.00 Pass through costs applicable to Program inpatient routine services (from Wkst. D, sum of Parts I and III)                                                                                                                                                      |                         |                         |                                          |                                             | 536,620                                   |
| 51.00 Pass through costs applicable to Program inpatient ancillary services (from Wkst. D, sum of Parts II and IV)                                                                                                                                                    |                         |                         |                                          |                                             | 170,562                                   |
| 52.00 Total Program excludable cost (sum of lines 50 and 51)                                                                                                                                                                                                          |                         |                         |                                          |                                             | 707,182                                   |
| 53.00 Total Program inpatient operating cost excluding capital related, non-physician anesthetist, and medical education costs (line 49 minus line 52)                                                                                                                |                         |                         |                                          |                                             | 6,332,219                                 |
| TARGET AMOUNT AND LIMIT COMPUTATION                                                                                                                                                                                                                                   |                         |                         |                                          |                                             |                                           |
| 54.00 Program discharges                                                                                                                                                                                                                                              |                         |                         |                                          |                                             | 0                                         |
| 55.00 Target amount per discharge                                                                                                                                                                                                                                     |                         |                         |                                          |                                             | 0.00                                      |
| 56.00 Target amount (line 54 x line 55)                                                                                                                                                                                                                               |                         |                         |                                          |                                             | 0                                         |
| 57.00 Difference between adjusted inpatient operating cost and target amount (line 56 minus line 53)                                                                                                                                                                  |                         |                         |                                          |                                             | 0                                         |
| 58.00 Bonus payment (see instructions)                                                                                                                                                                                                                                |                         |                         |                                          |                                             | 0                                         |
| 59.00 Lesser of lines 53/54 or 55 from the cost reporting period ending 1996, updated and compounded by the market basket                                                                                                                                             |                         |                         |                                          |                                             | 0.00                                      |
| 60.00 Lesser of lines 53/54 or 55 from prior year cost report, updated by the market basket                                                                                                                                                                           |                         |                         |                                          |                                             | 0.00                                      |
| 61.00 If line 53/54 is less than the lower of lines 55, 59 or 60 enter the lesser of 50% of the amount by which operating costs (line 53) are less than expected costs (lines 54 x 60), or 1% of the target amount (line 56), otherwise enter zero (see instructions) |                         |                         |                                          |                                             | 0                                         |
| 62.00 Relief payment (see instructions)                                                                                                                                                                                                                               |                         |                         |                                          |                                             | 0                                         |
| 63.00 Allowable Inpatient cost plus incentive payment (see instructions)                                                                                                                                                                                              |                         |                         |                                          |                                             | 0                                         |
| PROGRAM INPATIENT ROUTINE SWING BED COST                                                                                                                                                                                                                              |                         |                         |                                          |                                             |                                           |
| 64.00 Medicare swing-bed SNF inpatient routine costs through December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                            |                         |                         |                                          |                                             | 0                                         |
| 65.00 Medicare swing-bed SNF inpatient routine costs after December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                              |                         |                         |                                          |                                             | 0                                         |
| 66.00 Total Medicare swing-bed SNF inpatient routine costs (line 64 plus line 65)(title XVIII only). For CAH (see instructions)                                                                                                                                       |                         |                         |                                          |                                             | 0                                         |
| 67.00 Title V or XIX swing-bed NF inpatient routine costs through December 31 of the cost reporting period (line 12 x line 19)                                                                                                                                        |                         |                         |                                          |                                             | 0                                         |
| 68.00 Title V or XIX swing-bed NF inpatient routine costs after December 31 of the cost reporting period (line 13 x line 20)                                                                                                                                          |                         |                         |                                          |                                             | 0                                         |
| 69.00 Total title V or XIX swing-bed NF inpatient routine costs (line 67 + line 68)                                                                                                                                                                                   |                         |                         |                                          |                                             | 0                                         |
| PART III - SKILLED NURSING FACILITY, OTHER NURSING FACILITY, AND ICF/IID ONLY                                                                                                                                                                                         |                         |                         |                                          |                                             |                                           |
| 70.00 Skilled nursing facility/other nursing facility/ICF/IID routine service cost (line 37)                                                                                                                                                                          |                         |                         |                                          |                                             | 70.00                                     |
| 71.00 Adjusted general inpatient routine service cost per diem (line 70 ÷ line 2)                                                                                                                                                                                     |                         |                         |                                          |                                             | 71.00                                     |
| 72.00 Program routine service cost (line 9 x line 71)                                                                                                                                                                                                                 |                         |                         |                                          |                                             | 72.00                                     |
| 73.00 Medically necessary private room cost applicable to Program (line 14 x line 35)                                                                                                                                                                                 |                         |                         |                                          |                                             | 73.00                                     |
| 74.00 Total Program general inpatient routine service costs (line 72 + line 73)                                                                                                                                                                                       |                         |                         |                                          |                                             | 74.00                                     |
| 75.00 Capital-related cost allocated to inpatient routine service costs (from Worksheet B, Part II, column 26, line 45)                                                                                                                                               |                         |                         |                                          |                                             | 75.00                                     |
| 76.00 Per diem capital-related costs (line 75 ÷ line 2)                                                                                                                                                                                                               |                         |                         |                                          |                                             | 76.00                                     |
| 77.00 Program capital-related costs (line 9 x line 76)                                                                                                                                                                                                                |                         |                         |                                          |                                             | 77.00                                     |
| 78.00 Inpatient routine service cost (line 74 minus line 77)                                                                                                                                                                                                          |                         |                         |                                          |                                             | 78.00                                     |
| 79.00 Aggregate charges to beneficiaries for excess costs (from provider records)                                                                                                                                                                                     |                         |                         |                                          |                                             | 79.00                                     |
| 80.00 Total Program routine service costs for comparison to the cost limitation (line 78 minus line 79)                                                                                                                                                               |                         |                         |                                          |                                             | 80.00                                     |
| 81.00 Inpatient routine service cost per diem limitation                                                                                                                                                                                                              |                         |                         |                                          |                                             | 81.00                                     |
| 82.00 Inpatient routine service cost limitation (line 9 x line 81)                                                                                                                                                                                                    |                         |                         |                                          |                                             | 82.00                                     |
| 83.00 Reasonable inpatient routine service costs (see instructions)                                                                                                                                                                                                   |                         |                         |                                          |                                             | 83.00                                     |
| 84.00 Program inpatient ancillary services (see instructions)                                                                                                                                                                                                         |                         |                         |                                          |                                             | 84.00                                     |
| 85.00 Utilization review - physician compensation (see instructions)                                                                                                                                                                                                  |                         |                         |                                          |                                             | 85.00                                     |
| 86.00 Total Program inpatient operating costs (sum of lines 83 through 85)                                                                                                                                                                                            |                         |                         |                                          |                                             | 86.00                                     |
| PART IV - COMPUTATION OF OBSERVATION BED PASS THROUGH COST                                                                                                                                                                                                            |                         |                         |                                          |                                             |                                           |
| 87.00 Total observation bed days (see instructions)                                                                                                                                                                                                                   |                         |                         |                                          |                                             | 0                                         |
| 88.00 Adjusted general inpatient routine cost per diem (line 27 ÷ line 2)                                                                                                                                                                                             |                         |                         |                                          |                                             | 0.00                                      |
| 89.00 Observation bed cost (line 87 x line 88) (see instructions)                                                                                                                                                                                                     |                         |                         |                                          |                                             | 0                                         |

| COMPUTATION OF INPATIENT OPERATING COST          |                             | Provider CCN: 14-0119<br>Component CCN: 14-T119 |                                | Period:<br>From 07/01/2018<br>To 06/30/2019 |                                                    | Worksheet D-1<br>Date/Time Prepared:<br>11/24/2019 4:22 pm                            |       |
|--------------------------------------------------|-----------------------------|-------------------------------------------------|--------------------------------|---------------------------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------|-------|
|                                                  |                             | Title XVIII                                     |                                | Subprovider -<br>IRF                        |                                                    | PPS                                                                                   |       |
| Cost Center Description                          |                             | Cost                                            | Routine Cost<br>(from line 21) | column 1 ÷<br>column 2                      | Total<br>Observation<br>Bed Cost (from<br>line 89) | Observation<br>Bed Pass<br>Through Cost<br>(col. 3 x col.<br>4) (see<br>instructions) |       |
|                                                  |                             | 1.00                                            | 2.00                           | 3.00                                        | 4.00                                               | 5.00                                                                                  |       |
| COMPUTATION OF OBSERVATION BED PASS THROUGH COST |                             |                                                 |                                |                                             |                                                    |                                                                                       |       |
| 90.00                                            | Capital-related cost        | 945,728                                         | 10,804,318                     | 0.087532                                    | 0                                                  | 0                                                                                     | 90.00 |
| 91.00                                            | Nursing School cost         | 325,826                                         | 10,804,318                     | 0.030157                                    | 0                                                  | 0                                                                                     | 91.00 |
| 92.00                                            | Allied health cost          | 29,523                                          | 10,804,318                     | 0.002733                                    | 0                                                  | 0                                                                                     | 92.00 |
| 93.00                                            | All other Medical Education | 0                                               | 10,804,318                     | 0.000000                                    | 0                                                  | 0                                                                                     | 93.00 |

| COMPUTATION OF INPATIENT OPERATING COST                                      |                                                                                                                                                                                           | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-1<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|------------------------------------------------------------|
| Cost Center Description                                                      |                                                                                                                                                                                           | Title XIX             | Hospital                                    |                                                            |
|                                                                              |                                                                                                                                                                                           |                       |                                             | 1.00                                                       |
| <b>PART I - ALL PROVIDER COMPONENTS</b>                                      |                                                                                                                                                                                           |                       |                                             |                                                            |
| <b>INPATIENT DAYS</b>                                                        |                                                                                                                                                                                           |                       |                                             |                                                            |
| 1.00                                                                         | Inpatient days (including private room days and swing-bed days, excluding newborn)                                                                                                        |                       | 111,934                                     | 1.00                                                       |
| 2.00                                                                         | Inpatient days (including private room days, excluding swing-bed and newborn days)                                                                                                        |                       | 111,934                                     | 2.00                                                       |
| 3.00                                                                         | Private room days (excluding swing-bed and observation bed days). If you have only private room days, do not complete this line.                                                          |                       | 96,682                                      | 3.00                                                       |
| 4.00                                                                         | Semi-private room days (excluding swing-bed and observation bed days)                                                                                                                     |                       | 9,388                                       | 4.00                                                       |
| 5.00                                                                         | Total swing-bed SNF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                    |                       | 0                                           | 5.00                                                       |
| 6.00                                                                         | Total swing-bed SNF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                             |                       | 0                                           | 6.00                                                       |
| 7.00                                                                         | Total swing-bed NF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                     |                       | 0                                           | 7.00                                                       |
| 8.00                                                                         | Total swing-bed NF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                              |                       | 0                                           | 8.00                                                       |
| 9.00                                                                         | Total inpatient days including private room days applicable to the Program (excluding swing-bed and newborn days)                                                                         |                       | 6,900                                       | 9.00                                                       |
| 10.00                                                                        | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) through December 31 of the cost reporting period (see instructions)                        |                       | 0                                           | 10.00                                                      |
| 11.00                                                                        | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)    |                       | 0                                           | 11.00                                                      |
| 12.00                                                                        | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) through December 31 of the cost reporting period                                        |                       | 0                                           | 12.00                                                      |
| 13.00                                                                        | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line) |                       | 0                                           | 13.00                                                      |
| 14.00                                                                        | Medically necessary private room days applicable to the Program (excluding swing-bed days)                                                                                                |                       | 5,013                                       | 14.00                                                      |
| 15.00                                                                        | Total nursery days (title V or XIX only)                                                                                                                                                  |                       | 3,708                                       | 15.00                                                      |
| 16.00                                                                        | Nursery days (title V or XIX only)                                                                                                                                                        |                       | 1,807                                       | 16.00                                                      |
| <b>SWING BED ADJUSTMENT</b>                                                  |                                                                                                                                                                                           |                       |                                             |                                                            |
| 17.00                                                                        | Medicare rate for swing-bed SNF services applicable to services through December 31 of the cost reporting period                                                                          |                       | 0.00                                        | 17.00                                                      |
| 18.00                                                                        | Medicare rate for swing-bed SNF services applicable to services after December 31 of the cost reporting period                                                                            |                       | 0.00                                        | 18.00                                                      |
| 19.00                                                                        | Medicaid rate for swing-bed NF services applicable to services through December 31 of the cost reporting period                                                                           |                       | 0.00                                        | 19.00                                                      |
| 20.00                                                                        | Medicaid rate for swing-bed NF services applicable to services after December 31 of the cost reporting period                                                                             |                       | 0.00                                        | 20.00                                                      |
| 21.00                                                                        | Total general inpatient routine service cost (see instructions)                                                                                                                           |                       | 160,146,714                                 | 21.00                                                      |
| 22.00                                                                        | Swing-bed cost applicable to SNF type services through December 31 of the cost reporting period (line 5 x line 17)                                                                        |                       | 0                                           | 22.00                                                      |
| 23.00                                                                        | Swing-bed cost applicable to SNF type services after December 31 of the cost reporting period (line 6 x line 18)                                                                          |                       | 0                                           | 23.00                                                      |
| 24.00                                                                        | Swing-bed cost applicable to NF type services through December 31 of the cost reporting period (line 7 x line 19)                                                                         |                       | 0                                           | 24.00                                                      |
| 25.00                                                                        | Swing-bed cost applicable to NF type services after December 31 of the cost reporting period (line 8 x line 20)                                                                           |                       | 0                                           | 25.00                                                      |
| 26.00                                                                        | Total swing-bed cost (see instructions)                                                                                                                                                   |                       | 0                                           | 26.00                                                      |
| 27.00                                                                        | General inpatient routine service cost net of swing-bed cost (line 21 minus line 26)                                                                                                      |                       | 160,146,714                                 | 27.00                                                      |
| <b>PRIVATE ROOM DIFFERENTIAL ADJUSTMENT</b>                                  |                                                                                                                                                                                           |                       |                                             |                                                            |
| 28.00                                                                        | General inpatient routine service charges (excluding swing-bed and observation bed charges)                                                                                               |                       | 254,687,726                                 | 28.00                                                      |
| 29.00                                                                        | Private room charges (excluding swing-bed charges)                                                                                                                                        |                       | 223,717,845                                 | 29.00                                                      |
| 30.00                                                                        | Semi-private room charges (excluding swing-bed charges)                                                                                                                                   |                       | 30,969,881                                  | 30.00                                                      |
| 31.00                                                                        | General inpatient routine service cost/charge ratio (line 27 ÷ line 28)                                                                                                                   |                       | 0.628796                                    | 31.00                                                      |
| 32.00                                                                        | Average private room per diem charge (line 29 ÷ line 3)                                                                                                                                   |                       | 2,313.96                                    | 32.00                                                      |
| 33.00                                                                        | Average semi-private room per diem charge (line 30 ÷ line 4)                                                                                                                              |                       | 3,298.88                                    | 33.00                                                      |
| 34.00                                                                        | Average per diem private room charge differential (line 32 minus line 33)(see instructions)                                                                                               |                       | 0.00                                        | 34.00                                                      |
| 35.00                                                                        | Average per diem private room cost differential (line 34 x line 31)                                                                                                                       |                       | 0.00                                        | 35.00                                                      |
| 36.00                                                                        | Private room cost differential adjustment (line 3 x line 35)                                                                                                                              |                       | 0                                           | 36.00                                                      |
| 37.00                                                                        | General inpatient routine service cost net of swing-bed cost and private room cost differential (line 27 minus line 36)                                                                   |                       | 160,146,714                                 | 37.00                                                      |
| <b>PART II - HOSPITAL AND SUBPROVIDERS ONLY</b>                              |                                                                                                                                                                                           |                       |                                             |                                                            |
| <b>PROGRAM INPATIENT OPERATING COST BEFORE PASS THROUGH COST ADJUSTMENTS</b> |                                                                                                                                                                                           |                       |                                             |                                                            |
| 38.00                                                                        | Adjusted general inpatient routine service cost per diem (see instructions)                                                                                                               |                       | 1,430.72                                    | 38.00                                                      |
| 39.00                                                                        | Program general inpatient routine service cost (line 9 x line 38)                                                                                                                         |                       | 9,871,968                                   | 39.00                                                      |
| 40.00                                                                        | Medically necessary private room cost applicable to the Program (line 14 x line 35)                                                                                                       |                       | 0                                           | 40.00                                                      |
| 41.00                                                                        | Total Program general inpatient routine service cost (line 39 + line 40)                                                                                                                  |                       | 9,871,968                                   | 41.00                                                      |

## COMPUTATION OF INPATIENT OPERATING COST

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet D-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                                                       |                                                                                                                                                                                                                                                                 | Total Inpatient Cost | Total Inpatient Days | Average Per Diem (col. 1 ÷ col. 2) | Program Days | Program Cost (col. 3 x col. 4) |            |       |
|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|------------------------------------|--------------|--------------------------------|------------|-------|
|                                                                               |                                                                                                                                                                                                                                                                 | 1.00                 | 2.00                 | 3.00                               | 4.00         | 5.00                           |            |       |
| 42.00                                                                         | NURSERY (title V & XIX only)                                                                                                                                                                                                                                    | 6,566,724            | 3,708                | 1,770.96                           | 1,807        | 3,200,125                      | 42.00      |       |
| Intensive Care Type Inpatient Hospital Units                                  |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |            |       |
| 43.00                                                                         | INTENSIVE CARE UNIT                                                                                                                                                                                                                                             |                      |                      |                                    |              |                                | 43.00      |       |
| 44.00                                                                         | CORONARY CARE UNIT                                                                                                                                                                                                                                              |                      |                      |                                    |              |                                | 44.00      |       |
| 45.00                                                                         | BURN INTENSIVE CARE UNIT                                                                                                                                                                                                                                        |                      |                      |                                    |              |                                | 45.00      |       |
| 46.00                                                                         | SURGICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                    | 35,402,864           | 16,585               | 2,134.63                           | 1,670        | 3,564,832                      | 46.00      |       |
| 47.00                                                                         | MEDICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                     | 40,969,899           | 17,456               | 2,347.04                           | 1,054        | 2,473,780                      | 47.00      |       |
| 47.01                                                                         | PEDIATRIC INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 11,670,622           | 4,555                | 2,562.16                           | 2,226        | 5,703,368                      | 47.01      |       |
| 47.02                                                                         | PREMATURE INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 26,506,130           | 15,751               | 1,682.82                           | 8,366        | 14,078,472                     | 47.02      |       |
| Cost Center Description                                                       |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |            |       |
|                                                                               |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                | 1.00       |       |
| 48.00                                                                         | Program inpatient ancillary service cost (Wkst. D-3, col. 3, line 200)                                                                                                                                                                                          |                      |                      |                                    |              |                                | 0          | 48.00 |
| 49.00                                                                         | Total Program inpatient costs (sum of lines 41 through 48)(see instructions)                                                                                                                                                                                    |                      |                      |                                    |              |                                | 38,892,545 | 49.00 |
| PASS THROUGH COST ADJUSTMENTS                                                 |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |            |       |
| 50.00                                                                         | Pass through costs applicable to Program inpatient routine services (from Wkst. D, sum of Parts I and III)                                                                                                                                                      |                      |                      |                                    |              |                                | 0          | 50.00 |
| 51.00                                                                         | Pass through costs applicable to Program inpatient ancillary services (from Wkst. D, sum of Parts II and IV)                                                                                                                                                    |                      |                      |                                    |              |                                | 0          | 51.00 |
| 52.00                                                                         | Total Program excludable cost (sum of lines 50 and 51)                                                                                                                                                                                                          |                      |                      |                                    |              |                                | 0          | 52.00 |
| 53.00                                                                         | Total Program inpatient operating cost excluding capital related, non-physician anesthetist, and medical education costs (line 49 minus line 52)                                                                                                                |                      |                      |                                    |              |                                | 38,892,545 | 53.00 |
| TARGET AMOUNT AND LIMIT COMPUTATION                                           |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |            |       |
| 54.00                                                                         | Program discharges                                                                                                                                                                                                                                              |                      |                      |                                    |              |                                | 0          | 54.00 |
| 55.00                                                                         | Target amount per discharge                                                                                                                                                                                                                                     |                      |                      |                                    |              |                                | 0.00       | 55.00 |
| 56.00                                                                         | Target amount (line 54 x line 55)                                                                                                                                                                                                                               |                      |                      |                                    |              |                                | 0          | 56.00 |
| 57.00                                                                         | Difference between adjusted inpatient operating cost and target amount (line 56 minus line 53)                                                                                                                                                                  |                      |                      |                                    |              |                                | 0          | 57.00 |
| 58.00                                                                         | Bonus payment (see instructions)                                                                                                                                                                                                                                |                      |                      |                                    |              |                                | 0          | 58.00 |
| 59.00                                                                         | Lesser of lines 53/54 or 55 from the cost reporting period ending 1996, updated and compounded by the market basket                                                                                                                                             |                      |                      |                                    |              |                                | 0.00       | 59.00 |
| 60.00                                                                         | Lesser of lines 53/54 or 55 from prior year cost report, updated by the market basket                                                                                                                                                                           |                      |                      |                                    |              |                                | 0.00       | 60.00 |
| 61.00                                                                         | If line 53/54 is less than the lower of lines 55, 59 or 60 enter the lesser of 50% of the amount by which operating costs (line 53) are less than expected costs (lines 54 x 60), or 1% of the target amount (line 56), otherwise enter zero (see instructions) |                      |                      |                                    |              |                                | 0          | 61.00 |
| 62.00                                                                         | Relief payment (see instructions)                                                                                                                                                                                                                               |                      |                      |                                    |              |                                | 0          | 62.00 |
| 63.00                                                                         | Allowable Inpatient cost plus incentive payment (see instructions)                                                                                                                                                                                              |                      |                      |                                    |              |                                | 0          | 63.00 |
| PROGRAM INPATIENT ROUTINE SWING BED COST                                      |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |            |       |
| 64.00                                                                         | Medicare swing-bed SNF inpatient routine costs through December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                            |                      |                      |                                    |              |                                | 0          | 64.00 |
| 65.00                                                                         | Medicare swing-bed SNF inpatient routine costs after December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                              |                      |                      |                                    |              |                                | 0          | 65.00 |
| 66.00                                                                         | Total Medicare swing-bed SNF inpatient routine costs (line 64 plus line 65)(title XVIII only). For CAH (see instructions)                                                                                                                                       |                      |                      |                                    |              |                                | 0          | 66.00 |
| 67.00                                                                         | Title V or XIX swing-bed NF inpatient routine costs through December 31 of the cost reporting period (line 12 x line 19)                                                                                                                                        |                      |                      |                                    |              |                                | 0          | 67.00 |
| 68.00                                                                         | Title V or XIX swing-bed NF inpatient routine costs after December 31 of the cost reporting period (line 13 x line 20)                                                                                                                                          |                      |                      |                                    |              |                                | 0          | 68.00 |
| 69.00                                                                         | Total title V or XIX swing-bed NF inpatient routine costs (line 67 + line 68)                                                                                                                                                                                   |                      |                      |                                    |              |                                | 0          | 69.00 |
| PART III - SKILLED NURSING FACILITY, OTHER NURSING FACILITY, AND ICF/IID ONLY |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |            |       |
| 70.00                                                                         | Skilled nursing facility/other nursing facility/ICF/IID routine service cost (line 37)                                                                                                                                                                          |                      |                      |                                    |              |                                |            | 70.00 |
| 71.00                                                                         | Adjusted general inpatient routine service cost per diem (line 70 ÷ line 2)                                                                                                                                                                                     |                      |                      |                                    |              |                                |            | 71.00 |
| 72.00                                                                         | Program routine service cost (line 9 x line 71)                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |            | 72.00 |
| 73.00                                                                         | Medically necessary private room cost applicable to Program (line 14 x line 35)                                                                                                                                                                                 |                      |                      |                                    |              |                                |            | 73.00 |
| 74.00                                                                         | Total Program general inpatient routine service costs (line 72 + line 73)                                                                                                                                                                                       |                      |                      |                                    |              |                                |            | 74.00 |
| 75.00                                                                         | Capital-related cost allocated to inpatient routine service costs (from Worksheet B, Part II, column 26, line 45)                                                                                                                                               |                      |                      |                                    |              |                                |            | 75.00 |
| 76.00                                                                         | Per diem capital-related costs (line 75 ÷ line 2)                                                                                                                                                                                                               |                      |                      |                                    |              |                                |            | 76.00 |
| 77.00                                                                         | Program capital-related costs (line 9 x line 76)                                                                                                                                                                                                                |                      |                      |                                    |              |                                |            | 77.00 |
| 78.00                                                                         | Inpatient routine service cost (line 74 minus line 77)                                                                                                                                                                                                          |                      |                      |                                    |              |                                |            | 78.00 |
| 79.00                                                                         | Aggregate charges to beneficiaries for excess costs (from provider records)                                                                                                                                                                                     |                      |                      |                                    |              |                                |            | 79.00 |
| 80.00                                                                         | Total Program routine service costs for comparison to the cost limitation (line 78 minus line 79)                                                                                                                                                               |                      |                      |                                    |              |                                |            | 80.00 |
| 81.00                                                                         | Inpatient routine service cost per diem limitation                                                                                                                                                                                                              |                      |                      |                                    |              |                                |            | 81.00 |
| 82.00                                                                         | Inpatient routine service cost limitation (line 9 x line 81)                                                                                                                                                                                                    |                      |                      |                                    |              |                                |            | 82.00 |
| 83.00                                                                         | Reasonable inpatient routine service costs (see instructions)                                                                                                                                                                                                   |                      |                      |                                    |              |                                |            | 83.00 |
| 84.00                                                                         | Program inpatient ancillary services (see instructions)                                                                                                                                                                                                         |                      |                      |                                    |              |                                |            | 84.00 |
| 85.00                                                                         | Utilization review - physician compensation (see instructions)                                                                                                                                                                                                  |                      |                      |                                    |              |                                |            | 85.00 |
| 86.00                                                                         | Total Program inpatient operating costs (sum of lines 83 through 85)                                                                                                                                                                                            |                      |                      |                                    |              |                                |            | 86.00 |
| PART IV - COMPUTATION OF OBSERVATION BED PASS THROUGH COST                    |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |            |       |
| 87.00                                                                         | Total observation bed days (see instructions)                                                                                                                                                                                                                   |                      |                      |                                    |              |                                | 5,864      | 87.00 |
| 88.00                                                                         | Adjusted general inpatient routine cost per diem (line 27 ÷ line 2)                                                                                                                                                                                             |                      |                      |                                    |              |                                | 1,430.72   | 88.00 |
| 89.00                                                                         | Observation bed cost (line 87 x line 88) (see instructions)                                                                                                                                                                                                     |                      |                      |                                    |              |                                | 8,389,742  | 89.00 |

## COMPUTATION OF INPATIENT OPERATING COST

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet D-1

Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                          |                             | Title XIX |                                | Hospital               |                                                    | Observation<br>Bed Pass<br>Through Cost<br>(col. 3 x col.<br>4) (see<br>instructions) |       |
|--------------------------------------------------|-----------------------------|-----------|--------------------------------|------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------|-------|
|                                                  |                             | Cost      | Routine Cost<br>(from line 21) | column 1 ÷<br>column 2 | Total<br>Observation<br>Bed Cost (from<br>line 89) |                                                                                       |       |
|                                                  |                             | 1.00      | 2.00                           | 3.00                   | 4.00                                               | 5.00                                                                                  |       |
| COMPUTATION OF OBSERVATION BED PASS THROUGH COST |                             |           |                                |                        |                                                    |                                                                                       |       |
| 90.00                                            | Capital-related cost        | 0         | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 90.00 |
| 91.00                                            | Nursing School cost         | 0         | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 91.00 |
| 92.00                                            | Allied health cost          | 0         | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 92.00 |
| 93.00                                            | All other Medical Education | 0         | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 93.00 |

| COMPUTATION OF INPATIENT OPERATING COST                                      |                                                                                                                                                                                           | Provider CCN: 14-0119<br>Component CCN: 14-S119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-1<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|------------------------------------------------------------|
|                                                                              |                                                                                                                                                                                           | Title XIX                                       | Subprovider -<br>IPF                        |                                                            |
| Cost Center Description                                                      |                                                                                                                                                                                           |                                                 | 1.00                                        |                                                            |
| <b>PART I - ALL PROVIDER COMPONENTS</b>                                      |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| <b>INPATIENT DAYS</b>                                                        |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 1.00                                                                         | Inpatient days (including private room days and swing-bed days, excluding newborn)                                                                                                        |                                                 | 7,008                                       | 1.00                                                       |
| 2.00                                                                         | Inpatient days (including private room days, excluding swing-bed and newborn days)                                                                                                        |                                                 | 7,008                                       | 2.00                                                       |
| 3.00                                                                         | Private room days (excluding swing-bed and observation bed days). If you have only private room days, do not complete this line.                                                          |                                                 | 6,630                                       | 3.00                                                       |
| 4.00                                                                         | Semi-private room days (excluding swing-bed and observation bed days)                                                                                                                     |                                                 | 378                                         | 4.00                                                       |
| 5.00                                                                         | Total swing-bed SNF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                    |                                                 | 0                                           | 5.00                                                       |
| 6.00                                                                         | Total swing-bed SNF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                             |                                                 | 0                                           | 6.00                                                       |
| 7.00                                                                         | Total swing-bed NF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                     |                                                 | 0                                           | 7.00                                                       |
| 8.00                                                                         | Total swing-bed NF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                              |                                                 | 0                                           | 8.00                                                       |
| 9.00                                                                         | Total inpatient days including private room days applicable to the Program (excluding swing-bed and newborn days)                                                                         |                                                 | 635                                         | 9.00                                                       |
| 10.00                                                                        | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) through December 31 of the cost reporting period (see instructions)                        |                                                 | 0                                           | 10.00                                                      |
| 11.00                                                                        | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)    |                                                 | 0                                           | 11.00                                                      |
| 12.00                                                                        | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) through December 31 of the cost reporting period                                        |                                                 | 0                                           | 12.00                                                      |
| 13.00                                                                        | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line) |                                                 | 0                                           | 13.00                                                      |
| 14.00                                                                        | Medically necessary private room days applicable to the Program (excluding swing-bed days)                                                                                                |                                                 | 607                                         | 14.00                                                      |
| 15.00                                                                        | Total nursery days (title V or XIX only)                                                                                                                                                  |                                                 | 3,708                                       | 15.00                                                      |
| 16.00                                                                        | Nursery days (title V or XIX only)                                                                                                                                                        |                                                 | 1,807                                       | 16.00                                                      |
| <b>SWING BED ADJUSTMENT</b>                                                  |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 17.00                                                                        | Medicare rate for swing-bed SNF services applicable to services through December 31 of the cost reporting period                                                                          |                                                 | 0.00                                        | 17.00                                                      |
| 18.00                                                                        | Medicare rate for swing-bed SNF services applicable to services after December 31 of the cost reporting period                                                                            |                                                 | 0.00                                        | 18.00                                                      |
| 19.00                                                                        | Medicaid rate for swing-bed NF services applicable to services through December 31 of the cost reporting period                                                                           |                                                 | 0.00                                        | 19.00                                                      |
| 20.00                                                                        | Medicaid rate for swing-bed NF services applicable to services after December 31 of the cost reporting period                                                                             |                                                 | 0.00                                        | 20.00                                                      |
| 21.00                                                                        | Total general inpatient routine service cost (see instructions)                                                                                                                           |                                                 | 12,410,157                                  | 21.00                                                      |
| 22.00                                                                        | Swing-bed cost applicable to SNF type services through December 31 of the cost reporting period (line 5 x line 17)                                                                        |                                                 | 0                                           | 22.00                                                      |
| 23.00                                                                        | Swing-bed cost applicable to SNF type services after December 31 of the cost reporting period (line 6 x line 18)                                                                          |                                                 | 0                                           | 23.00                                                      |
| 24.00                                                                        | Swing-bed cost applicable to NF type services through December 31 of the cost reporting period (line 7 x line 19)                                                                         |                                                 | 0                                           | 24.00                                                      |
| 25.00                                                                        | Swing-bed cost applicable to NF type services after December 31 of the cost reporting period (line 8 x line 20)                                                                           |                                                 | 0                                           | 25.00                                                      |
| 26.00                                                                        | Total swing-bed cost (see instructions)                                                                                                                                                   |                                                 | 0                                           | 26.00                                                      |
| 27.00                                                                        | General inpatient routine service cost net of swing-bed cost (line 21 minus line 26)                                                                                                      |                                                 | 12,410,157                                  | 27.00                                                      |
| <b>PRIVATE ROOM DIFFERENTIAL ADJUSTMENT</b>                                  |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 28.00                                                                        | General inpatient routine service charges (excluding swing-bed and observation bed charges)                                                                                               |                                                 | 16,288,765                                  | 28.00                                                      |
| 29.00                                                                        | Private room charges (excluding swing-bed charges)                                                                                                                                        |                                                 | 15,397,975                                  | 29.00                                                      |
| 30.00                                                                        | Semi-private room charges (excluding swing-bed charges)                                                                                                                                   |                                                 | 890,790                                     | 30.00                                                      |
| 31.00                                                                        | General inpatient routine service cost/charge ratio (line 27 ÷ line 28)                                                                                                                   |                                                 | 0.761884                                    | 31.00                                                      |
| 32.00                                                                        | Average private room per diem charge (line 29 ÷ line 3)                                                                                                                                   |                                                 | 2,322.47                                    | 32.00                                                      |
| 33.00                                                                        | Average semi-private room per diem charge (line 30 ÷ line 4)                                                                                                                              |                                                 | 2,356.59                                    | 33.00                                                      |
| 34.00                                                                        | Average per diem private room charge differential (line 32 minus line 33)(see instructions)                                                                                               |                                                 | 0.00                                        | 34.00                                                      |
| 35.00                                                                        | Average per diem private room cost differential (line 34 x line 31)                                                                                                                       |                                                 | 0.00                                        | 35.00                                                      |
| 36.00                                                                        | Private room cost differential adjustment (line 3 x line 35)                                                                                                                              |                                                 | 0                                           | 36.00                                                      |
| 37.00                                                                        | General inpatient routine service cost net of swing-bed cost and private room cost differential (line 27 minus line 36)                                                                   |                                                 | 12,410,157                                  | 37.00                                                      |
| <b>PART II - HOSPITAL AND SUBPROVIDERS ONLY</b>                              |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| <b>PROGRAM INPATIENT OPERATING COST BEFORE PASS THROUGH COST ADJUSTMENTS</b> |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 38.00                                                                        | Adjusted general inpatient routine service cost per diem (see instructions)                                                                                                               |                                                 | 1,770.86                                    | 38.00                                                      |
| 39.00                                                                        | Program general inpatient routine service cost (line 9 x line 38)                                                                                                                         |                                                 | 1,124,496                                   | 39.00                                                      |
| 40.00                                                                        | Medically necessary private room cost applicable to the Program (line 14 x line 35)                                                                                                       |                                                 | 0                                           | 40.00                                                      |
| 41.00                                                                        | Total Program general inpatient routine service cost (line 39 + line 40)                                                                                                                  |                                                 | 1,124,496                                   | 41.00                                                      |

## COMPUTATION OF INPATIENT OPERATING COST

Provider CCN: 14-0119

Period:

Worksheet D-1

Component CCN: 14-S119

From 07/01/2018

Date/Time Prepared:

To 06/30/2019

11/24/2019 4:22 pm

| Cost Center Description                                                       |                                                                                                                                                                                                                                                                 | Total Inpatient Cost | Total Inpatient Days | Average Per Diem (col. 1 ÷ col. 2) | Program Days | Program Cost (col. 3 x col. 4) |       |
|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|------------------------------------|--------------|--------------------------------|-------|
|                                                                               |                                                                                                                                                                                                                                                                 | 1.00                 | 2.00                 | 3.00                               | 4.00         | 5.00                           |       |
| 42.00                                                                         | NURSERY (title V & XIX only)                                                                                                                                                                                                                                    | 0                    | 0                    | 0.00                               | 0            | 0                              | 42.00 |
| Intensive Care Type Inpatient Hospital Units                                  |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |       |
| 43.00                                                                         | INTENSIVE CARE UNIT                                                                                                                                                                                                                                             |                      |                      |                                    |              |                                | 43.00 |
| 44.00                                                                         | CORONARY CARE UNIT                                                                                                                                                                                                                                              |                      |                      |                                    |              |                                | 44.00 |
| 45.00                                                                         | BURN INTENSIVE CARE UNIT                                                                                                                                                                                                                                        |                      |                      |                                    |              |                                | 45.00 |
| 46.00                                                                         | SURGICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                    | 0                    | 0                    | 0.00                               | 0            | 0                              | 46.00 |
| 47.00                                                                         | MEDICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                     | 0                    | 0                    | 0.00                               | 0            | 0                              | 47.00 |
| 47.01                                                                         | PEDIATRIC INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 0                    | 0                    | 0.00                               | 0            | 0                              | 47.01 |
| 47.02                                                                         | PREMATURE INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 0                    | 0                    | 0.00                               | 0            | 0                              | 47.02 |
| Cost Center Description                                                       |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |       |
|                                                                               |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                | 1.00  |
| 48.00                                                                         | Program inpatient ancillary service cost (Wkst. D-3, col. 3, line 200)                                                                                                                                                                                          |                      |                      |                                    |              | 0                              | 48.00 |
| 49.00                                                                         | Total Program inpatient costs (sum of lines 41 through 48)(see instructions)                                                                                                                                                                                    |                      |                      |                                    |              | 1,124,496                      | 49.00 |
| PASS THROUGH COST ADJUSTMENTS                                                 |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |       |
| 50.00                                                                         | Pass through costs applicable to Program inpatient routine services (from Wkst. D, sum of Parts I and III)                                                                                                                                                      |                      |                      |                                    |              | 0                              | 50.00 |
| 51.00                                                                         | Pass through costs applicable to Program inpatient ancillary services (from Wkst. D, sum of Parts II and IV)                                                                                                                                                    |                      |                      |                                    |              | 0                              | 51.00 |
| 52.00                                                                         | Total Program excludable cost (sum of lines 50 and 51)                                                                                                                                                                                                          |                      |                      |                                    |              | 0                              | 52.00 |
| 53.00                                                                         | Total Program inpatient operating cost excluding capital related, non-physician anesthetist, and medical education costs (line 49 minus line 52)                                                                                                                |                      |                      |                                    |              | 1,124,496                      | 53.00 |
| TARGET AMOUNT AND LIMIT COMPUTATION                                           |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |       |
| 54.00                                                                         | Program discharges                                                                                                                                                                                                                                              |                      |                      |                                    |              | 0                              | 54.00 |
| 55.00                                                                         | Target amount per discharge                                                                                                                                                                                                                                     |                      |                      |                                    |              | 0.00                           | 55.00 |
| 56.00                                                                         | Target amount (line 54 x line 55)                                                                                                                                                                                                                               |                      |                      |                                    |              | 0                              | 56.00 |
| 57.00                                                                         | Difference between adjusted inpatient operating cost and target amount (line 56 minus line 53)                                                                                                                                                                  |                      |                      |                                    |              | 0                              | 57.00 |
| 58.00                                                                         | Bonus payment (see instructions)                                                                                                                                                                                                                                |                      |                      |                                    |              | 0                              | 58.00 |
| 59.00                                                                         | Lesser of lines 53/54 or 55 from the cost reporting period ending 1996, updated and compounded by the market basket                                                                                                                                             |                      |                      |                                    |              | 0.00                           | 59.00 |
| 60.00                                                                         | Lesser of lines 53/54 or 55 from prior year cost report, updated by the market basket                                                                                                                                                                           |                      |                      |                                    |              | 0.00                           | 60.00 |
| 61.00                                                                         | If line 53/54 is less than the lower of lines 55, 59 or 60 enter the lesser of 50% of the amount by which operating costs (line 53) are less than expected costs (lines 54 x 60), or 1% of the target amount (line 56), otherwise enter zero (see instructions) |                      |                      |                                    |              | 0                              | 61.00 |
| 62.00                                                                         | Relief payment (see instructions)                                                                                                                                                                                                                               |                      |                      |                                    |              | 0                              | 62.00 |
| 63.00                                                                         | Allowable Inpatient cost plus incentive payment (see instructions)                                                                                                                                                                                              |                      |                      |                                    |              | 0                              | 63.00 |
| PROGRAM INPATIENT ROUTINE SWING BED COST                                      |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |       |
| 64.00                                                                         | Medicare swing-bed SNF inpatient routine costs through December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                            |                      |                      |                                    |              | 0                              | 64.00 |
| 65.00                                                                         | Medicare swing-bed SNF inpatient routine costs after December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                              |                      |                      |                                    |              | 0                              | 65.00 |
| 66.00                                                                         | Total Medicare swing-bed SNF inpatient routine costs (line 64 plus line 65)(title XVIII only). For CAH (see instructions)                                                                                                                                       |                      |                      |                                    |              | 0                              | 66.00 |
| 67.00                                                                         | Title V or XIX swing-bed NF inpatient routine costs through December 31 of the cost reporting period (line 12 x line 19)                                                                                                                                        |                      |                      |                                    |              | 0                              | 67.00 |
| 68.00                                                                         | Title V or XIX swing-bed NF inpatient routine costs after December 31 of the cost reporting period (line 13 x line 20)                                                                                                                                          |                      |                      |                                    |              | 0                              | 68.00 |
| 69.00                                                                         | Total title V or XIX swing-bed NF inpatient routine costs (line 67 + line 68)                                                                                                                                                                                   |                      |                      |                                    |              | 0                              | 69.00 |
| PART III - SKILLED NURSING FACILITY, OTHER NURSING FACILITY, AND ICF/IID ONLY |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |       |
| 70.00                                                                         | Skilled nursing facility/other nursing facility/ICF/IID routine service cost (line 37)                                                                                                                                                                          |                      |                      |                                    |              | 0                              | 70.00 |
| 71.00                                                                         | Adjusted general inpatient routine service cost per diem (line 70 ÷ line 2)                                                                                                                                                                                     |                      |                      |                                    |              | 0                              | 71.00 |
| 72.00                                                                         | Program routine service cost (line 9 x line 71)                                                                                                                                                                                                                 |                      |                      |                                    |              | 0                              | 72.00 |
| 73.00                                                                         | Medically necessary private room cost applicable to Program (line 14 x line 35)                                                                                                                                                                                 |                      |                      |                                    |              | 0                              | 73.00 |
| 74.00                                                                         | Total Program general inpatient routine service costs (line 72 + line 73)                                                                                                                                                                                       |                      |                      |                                    |              | 0                              | 74.00 |
| 75.00                                                                         | Capital-related cost allocated to inpatient routine service costs (from Worksheet B, Part II, column 26, line 45)                                                                                                                                               |                      |                      |                                    |              | 0                              | 75.00 |
| 76.00                                                                         | Per diem capital-related costs (line 75 ÷ line 2)                                                                                                                                                                                                               |                      |                      |                                    |              | 0                              | 76.00 |
| 77.00                                                                         | Program capital-related costs (line 9 x line 76)                                                                                                                                                                                                                |                      |                      |                                    |              | 0                              | 77.00 |
| 78.00                                                                         | Inpatient routine service cost (line 74 minus line 77)                                                                                                                                                                                                          |                      |                      |                                    |              | 0                              | 78.00 |
| 79.00                                                                         | Aggregate charges to beneficiaries for excess costs (from provider records)                                                                                                                                                                                     |                      |                      |                                    |              | 0                              | 79.00 |
| 80.00                                                                         | Total Program routine service costs for comparison to the cost limitation (line 78 minus line 79)                                                                                                                                                               |                      |                      |                                    |              | 0                              | 80.00 |
| 81.00                                                                         | Inpatient routine service cost per diem limitation                                                                                                                                                                                                              |                      |                      |                                    |              | 0                              | 81.00 |
| 82.00                                                                         | Inpatient routine service cost limitation (line 9 x line 81)                                                                                                                                                                                                    |                      |                      |                                    |              | 0                              | 82.00 |
| 83.00                                                                         | Reasonable inpatient routine service costs (see instructions)                                                                                                                                                                                                   |                      |                      |                                    |              | 0                              | 83.00 |
| 84.00                                                                         | Program inpatient ancillary services (see instructions)                                                                                                                                                                                                         |                      |                      |                                    |              | 0                              | 84.00 |
| 85.00                                                                         | Utilization review - physician compensation (see instructions)                                                                                                                                                                                                  |                      |                      |                                    |              | 0                              | 85.00 |
| 86.00                                                                         | Total Program inpatient operating costs (sum of lines 83 through 85)                                                                                                                                                                                            |                      |                      |                                    |              | 0                              | 86.00 |
| PART IV - COMPUTATION OF OBSERVATION BED PASS THROUGH COST                    |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                                |       |
| 87.00                                                                         | Total observation bed days (see instructions)                                                                                                                                                                                                                   |                      |                      |                                    |              | 0                              | 87.00 |
| 88.00                                                                         | Adjusted general inpatient routine cost per diem (line 27 ÷ line 2)                                                                                                                                                                                             |                      |                      |                                    |              | 0.00                           | 88.00 |
| 89.00                                                                         | Observation bed cost (line 87 x line 88) (see instructions)                                                                                                                                                                                                     |                      |                      |                                    |              | 0                              | 89.00 |

## COMPUTATION OF INPATIENT OPERATING COST

Provider CCN: 14-0119

Period:

Worksheet D-1

Component CCN: 14-S119

From 07/01/2018  
To 06/30/2019Date/Time Prepared:  
11/24/2019 4:22 pm

Title XIX

Subprovider -  
IPF

| Cost Center Description                          |                             | Cost | Routine Cost<br>(from line 21) | column 1 ÷<br>column 2 | Total<br>Observation<br>Bed Cost (from<br>line 89) | Observation<br>Bed Pass<br>Through Cost<br>(col. 3 x col.<br>4) (see<br>instructions) |       |
|--------------------------------------------------|-----------------------------|------|--------------------------------|------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------|-------|
|                                                  |                             | 1.00 | 2.00                           | 3.00                   | 4.00                                               | 5.00                                                                                  |       |
| COMPUTATION OF OBSERVATION BED PASS THROUGH COST |                             |      |                                |                        |                                                    |                                                                                       |       |
| 90.00                                            | Capital-related cost        | 0    | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 90.00 |
| 91.00                                            | Nursing School cost         | 0    | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 91.00 |
| 92.00                                            | Allied health cost          | 0    | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 92.00 |
| 93.00                                            | All other Medical Education | 0    | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 93.00 |

| COMPUTATION OF INPATIENT OPERATING COST                                      |                                                                                                                                                                                           | Provider CCN: 14-0119<br>Component CCN: 14-T119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-1<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|------------------------------------------------------------|
|                                                                              |                                                                                                                                                                                           | Title XIX                                       | Subprovider -<br>IRF                        |                                                            |
| Cost Center Description                                                      |                                                                                                                                                                                           |                                                 | 1.00                                        |                                                            |
| <b>PART I - ALL PROVIDER COMPONENTS</b>                                      |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| <b>INPATIENT DAYS</b>                                                        |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 1.00                                                                         | Inpatient days (including private room days and swing-bed days, excluding newborn)                                                                                                        |                                                 | 9,226                                       | 1.00                                                       |
| 2.00                                                                         | Inpatient days (including private room days, excluding swing-bed and newborn days)                                                                                                        |                                                 | 9,226                                       | 2.00                                                       |
| 3.00                                                                         | Private room days (excluding swing-bed and observation bed days). If you have only private room days, do not complete this line.                                                          |                                                 | 6,964                                       | 3.00                                                       |
| 4.00                                                                         | Semi-private room days (excluding swing-bed and observation bed days)                                                                                                                     |                                                 | 2,262                                       | 4.00                                                       |
| 5.00                                                                         | Total swing-bed SNF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                    |                                                 | 0                                           | 5.00                                                       |
| 6.00                                                                         | Total swing-bed SNF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                             |                                                 | 0                                           | 6.00                                                       |
| 7.00                                                                         | Total swing-bed NF type inpatient days (including private room days) through December 31 of the cost reporting period                                                                     |                                                 | 0                                           | 7.00                                                       |
| 8.00                                                                         | Total swing-bed NF type inpatient days (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)                              |                                                 | 0                                           | 8.00                                                       |
| 9.00                                                                         | Total inpatient days including private room days applicable to the Program (excluding swing-bed and newborn days)                                                                         |                                                 | 1,336                                       | 9.00                                                       |
| 10.00                                                                        | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) through December 31 of the cost reporting period (see instructions)                        |                                                 | 0                                           | 10.00                                                      |
| 11.00                                                                        | Swing-bed SNF type inpatient days applicable to title XVIII only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line)    |                                                 | 0                                           | 11.00                                                      |
| 12.00                                                                        | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) through December 31 of the cost reporting period                                        |                                                 | 0                                           | 12.00                                                      |
| 13.00                                                                        | Swing-bed NF type inpatient days applicable to titles V or XIX only (including private room days) after December 31 of the cost reporting period (if calendar year, enter 0 on this line) |                                                 | 0                                           | 13.00                                                      |
| 14.00                                                                        | Medically necessary private room days applicable to the Program (excluding swing-bed days)                                                                                                |                                                 | 807                                         | 14.00                                                      |
| 15.00                                                                        | Total nursery days (title V or XIX only)                                                                                                                                                  |                                                 | 3,708                                       | 15.00                                                      |
| 16.00                                                                        | Nursery days (title V or XIX only)                                                                                                                                                        |                                                 | 1,807                                       | 16.00                                                      |
| <b>SWING BED ADJUSTMENT</b>                                                  |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 17.00                                                                        | Medicare rate for swing-bed SNF services applicable to services through December 31 of the cost reporting period                                                                          |                                                 | 0.00                                        | 17.00                                                      |
| 18.00                                                                        | Medicare rate for swing-bed SNF services applicable to services after December 31 of the cost reporting period                                                                            |                                                 | 0.00                                        | 18.00                                                      |
| 19.00                                                                        | Medicaid rate for swing-bed NF services applicable to services through December 31 of the cost reporting period                                                                           |                                                 | 0.00                                        | 19.00                                                      |
| 20.00                                                                        | Medicaid rate for swing-bed NF services applicable to services after December 31 of the cost reporting period                                                                             |                                                 | 0.00                                        | 20.00                                                      |
| 21.00                                                                        | Total general inpatient routine service cost (see instructions)                                                                                                                           |                                                 | 11,359,143                                  | 21.00                                                      |
| 22.00                                                                        | Swing-bed cost applicable to SNF type services through December 31 of the cost reporting period (line 5 x line 17)                                                                        |                                                 | 0                                           | 22.00                                                      |
| 23.00                                                                        | Swing-bed cost applicable to SNF type services after December 31 of the cost reporting period (line 6 x line 18)                                                                          |                                                 | 0                                           | 23.00                                                      |
| 24.00                                                                        | Swing-bed cost applicable to NF type services through December 31 of the cost reporting period (line 7 x line 19)                                                                         |                                                 | 0                                           | 24.00                                                      |
| 25.00                                                                        | Swing-bed cost applicable to NF type services after December 31 of the cost reporting period (line 8 x line 20)                                                                           |                                                 | 0                                           | 25.00                                                      |
| 26.00                                                                        | Total swing-bed cost (see instructions)                                                                                                                                                   |                                                 | 0                                           | 26.00                                                      |
| 27.00                                                                        | General inpatient routine service cost net of swing-bed cost (line 21 minus line 26)                                                                                                      |                                                 | 11,359,143                                  | 27.00                                                      |
| <b>PRIVATE ROOM DIFFERENTIAL ADJUSTMENT</b>                                  |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 28.00                                                                        | General inpatient routine service charges (excluding swing-bed and observation bed charges)                                                                                               |                                                 | 21,358,190                                  | 28.00                                                      |
| 29.00                                                                        | Private room charges (excluding swing-bed charges)                                                                                                                                        |                                                 | 16,121,660                                  | 29.00                                                      |
| 30.00                                                                        | Semi-private room charges (excluding swing-bed charges)                                                                                                                                   |                                                 | 5,236,530                                   | 30.00                                                      |
| 31.00                                                                        | General inpatient routine service cost/charge ratio (line 27 ÷ line 28)                                                                                                                   |                                                 | 0.531840                                    | 31.00                                                      |
| 32.00                                                                        | Average private room per diem charge (line 29 ÷ line 3)                                                                                                                                   |                                                 | 2,315.00                                    | 32.00                                                      |
| 33.00                                                                        | Average semi-private room per diem charge (line 30 ÷ line 4)                                                                                                                              |                                                 | 2,315.00                                    | 33.00                                                      |
| 34.00                                                                        | Average per diem private room charge differential (line 32 minus line 33)(see instructions)                                                                                               |                                                 | 0.00                                        | 34.00                                                      |
| 35.00                                                                        | Average per diem private room cost differential (line 34 x line 31)                                                                                                                       |                                                 | 0.00                                        | 35.00                                                      |
| 36.00                                                                        | Private room cost differential adjustment (line 3 x line 35)                                                                                                                              |                                                 | 0                                           | 36.00                                                      |
| 37.00                                                                        | General inpatient routine service cost net of swing-bed cost and private room cost differential (line 27 minus line 36)                                                                   |                                                 | 11,359,143                                  | 37.00                                                      |
| <b>PART II - HOSPITAL AND SUBPROVIDERS ONLY</b>                              |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| <b>PROGRAM INPATIENT OPERATING COST BEFORE PASS THROUGH COST ADJUSTMENTS</b> |                                                                                                                                                                                           |                                                 |                                             |                                                            |
| 38.00                                                                        | Adjusted general inpatient routine service cost per diem (see instructions)                                                                                                               |                                                 | 1,231.21                                    | 38.00                                                      |
| 39.00                                                                        | Program general inpatient routine service cost (line 9 x line 38)                                                                                                                         |                                                 | 1,644,897                                   | 39.00                                                      |
| 40.00                                                                        | Medically necessary private room cost applicable to the Program (line 14 x line 35)                                                                                                       |                                                 | 0                                           | 40.00                                                      |
| 41.00                                                                        | Total Program general inpatient routine service cost (line 39 + line 40)                                                                                                                  |                                                 | 1,644,897                                   | 41.00                                                      |

## COMPUTATION OF INPATIENT OPERATING COST

Provider CCN: 14-0119

Period:

Worksheet D-1

Component CCN: 14-T119

From 07/01/2018

Date/Time Prepared:

To 06/30/2019

11/24/2019 4:22 pm

|                                                                               |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                |                    |       |
|-------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|----------------------|------------------------------------|--------------|-------------------|--------------------------------|--------------------|-------|
|                                                                               |                                                                                                                                                                                                                                                                 |                      |                      | Title XIX                          |              | Subprovider - IRF |                                | 11/24/2019 4:22 pm |       |
| Cost Center Description                                                       |                                                                                                                                                                                                                                                                 | Total Inpatient Cost | Total Inpatient Days | Average Per Diem (col. 1 ÷ col. 2) | Program Days |                   | Program Cost (col. 3 x col. 4) |                    |       |
|                                                                               |                                                                                                                                                                                                                                                                 | 1.00                 | 2.00                 | 3.00                               | 4.00         |                   | 5.00                           |                    |       |
| 42.00                                                                         | NURSERY (title V & XIX only)                                                                                                                                                                                                                                    | 0                    | 0                    | 0.00                               | 0            |                   | 0                              |                    | 42.00 |
| Intensive Care Type Inpatient Hospital Units                                  |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                |                    |       |
| 43.00                                                                         | INTENSIVE CARE UNIT                                                                                                                                                                                                                                             |                      |                      |                                    |              |                   |                                |                    | 43.00 |
| 44.00                                                                         | CORONARY CARE UNIT                                                                                                                                                                                                                                              |                      |                      |                                    |              |                   |                                |                    | 44.00 |
| 45.00                                                                         | BURN INTENSIVE CARE UNIT                                                                                                                                                                                                                                        |                      |                      |                                    |              |                   |                                |                    | 45.00 |
| 46.00                                                                         | SURGICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                    | 0                    | 0                    | 0.00                               | 0            |                   | 0                              |                    | 46.00 |
| 47.00                                                                         | MEDICAL INTENSIVE CARE UNIT                                                                                                                                                                                                                                     | 0                    | 0                    | 0.00                               | 0            |                   | 0                              |                    | 47.00 |
| 47.01                                                                         | PEDIATRIC INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 0                    | 0                    | 0.00                               | 0            |                   | 0                              |                    | 47.01 |
| 47.02                                                                         | PREMATURE INTENSIVE CARE UNIT                                                                                                                                                                                                                                   | 0                    | 0                    | 0.00                               | 0            |                   | 0                              |                    | 47.02 |
| Cost Center Description                                                       |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                |                    |       |
|                                                                               |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                | 1.00               |       |
| 48.00                                                                         | Program inpatient ancillary service cost (Wkst. D-3, col. 3, line 200)                                                                                                                                                                                          |                      |                      |                                    |              |                   |                                | 0                  | 48.00 |
| 49.00                                                                         | Total Program inpatient costs (sum of lines 41 through 48)(see instructions)                                                                                                                                                                                    |                      |                      |                                    |              |                   |                                | 1,644,897          | 49.00 |
| PASS THROUGH COST ADJUSTMENTS                                                 |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                |                    |       |
| 50.00                                                                         | Pass through costs applicable to Program inpatient routine services (from Wkst. D, sum of Parts I and III)                                                                                                                                                      |                      |                      |                                    |              |                   |                                | 0                  | 50.00 |
| 51.00                                                                         | Pass through costs applicable to Program inpatient ancillary services (from Wkst. D, sum of Parts II and IV)                                                                                                                                                    |                      |                      |                                    |              |                   |                                | 0                  | 51.00 |
| 52.00                                                                         | Total Program excludable cost (sum of lines 50 and 51)                                                                                                                                                                                                          |                      |                      |                                    |              |                   |                                | 0                  | 52.00 |
| 53.00                                                                         | Total Program inpatient operating cost excluding capital related, non-physician anesthetist, and medical education costs (line 49 minus line 52)                                                                                                                |                      |                      |                                    |              |                   |                                | 1,644,897          | 53.00 |
| TARGET AMOUNT AND LIMIT COMPUTATION                                           |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                |                    |       |
| 54.00                                                                         | Program discharges                                                                                                                                                                                                                                              |                      |                      |                                    |              |                   |                                | 0                  | 54.00 |
| 55.00                                                                         | Target amount per discharge                                                                                                                                                                                                                                     |                      |                      |                                    |              |                   |                                | 0.00               | 55.00 |
| 56.00                                                                         | Target amount (line 54 x line 55)                                                                                                                                                                                                                               |                      |                      |                                    |              |                   |                                | 0                  | 56.00 |
| 57.00                                                                         | Difference between adjusted inpatient operating cost and target amount (line 56 minus line 53)                                                                                                                                                                  |                      |                      |                                    |              |                   |                                | 0                  | 57.00 |
| 58.00                                                                         | Bonus payment (see instructions)                                                                                                                                                                                                                                |                      |                      |                                    |              |                   |                                | 0                  | 58.00 |
| 59.00                                                                         | Lesser of lines 53/54 or 55 from the cost reporting period ending 1996, updated and compounded by the market basket                                                                                                                                             |                      |                      |                                    |              |                   |                                | 0.00               | 59.00 |
| 60.00                                                                         | Lesser of lines 53/54 or 55 from prior year cost report, updated by the market basket                                                                                                                                                                           |                      |                      |                                    |              |                   |                                | 0.00               | 60.00 |
| 61.00                                                                         | If line 53/54 is less than the lower of lines 55, 59 or 60 enter the lesser of 50% of the amount by which operating costs (line 53) are less than expected costs (lines 54 x 60), or 1% of the target amount (line 56), otherwise enter zero (see instructions) |                      |                      |                                    |              |                   |                                | 0                  | 61.00 |
| 62.00                                                                         | Relief payment (see instructions)                                                                                                                                                                                                                               |                      |                      |                                    |              |                   |                                | 0                  | 62.00 |
| 63.00                                                                         | Allowable Inpatient cost plus incentive payment (see instructions)                                                                                                                                                                                              |                      |                      |                                    |              |                   |                                | 0                  | 63.00 |
| PROGRAM INPATIENT ROUTINE SWING BED COST                                      |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                |                    |       |
| 64.00                                                                         | Medicare swing-bed SNF inpatient routine costs through December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                            |                      |                      |                                    |              |                   |                                | 0                  | 64.00 |
| 65.00                                                                         | Medicare swing-bed SNF inpatient routine costs after December 31 of the cost reporting period (See instructions)(title XVIII only)                                                                                                                              |                      |                      |                                    |              |                   |                                | 0                  | 65.00 |
| 66.00                                                                         | Total Medicare swing-bed SNF inpatient routine costs (line 64 plus line 65)(title XVIII only). For CAH (see instructions)                                                                                                                                       |                      |                      |                                    |              |                   |                                | 0                  | 66.00 |
| 67.00                                                                         | Title V or XIX swing-bed NF inpatient routine costs through December 31 of the cost reporting period (line 12 x line 19)                                                                                                                                        |                      |                      |                                    |              |                   |                                | 0                  | 67.00 |
| 68.00                                                                         | Title V or XIX swing-bed NF inpatient routine costs after December 31 of the cost reporting period (line 13 x line 20)                                                                                                                                          |                      |                      |                                    |              |                   |                                | 0                  | 68.00 |
| 69.00                                                                         | Total title V or XIX swing-bed NF inpatient routine costs (line 67 + line 68)                                                                                                                                                                                   |                      |                      |                                    |              |                   |                                | 0                  | 69.00 |
| PART III - SKILLED NURSING FACILITY, OTHER NURSING FACILITY, AND ICF/IID ONLY |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                |                    |       |
| 70.00                                                                         | Skilled nursing facility/other nursing facility/ICF/IID routine service cost (line 37)                                                                                                                                                                          |                      |                      |                                    |              |                   |                                |                    | 70.00 |
| 71.00                                                                         | Adjusted general inpatient routine service cost per diem (line 70 ÷ line 2)                                                                                                                                                                                     |                      |                      |                                    |              |                   |                                |                    | 71.00 |
| 72.00                                                                         | Program routine service cost (line 9 x line 71)                                                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                |                    | 72.00 |
| 73.00                                                                         | Medically necessary private room cost applicable to Program (line 14 x line 35)                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                |                    | 73.00 |
| 74.00                                                                         | Total Program general inpatient routine service costs (line 72 + line 73)                                                                                                                                                                                       |                      |                      |                                    |              |                   |                                |                    | 74.00 |
| 75.00                                                                         | Capital-related cost allocated to inpatient routine service costs (from Worksheet B, Part II, column 26, line 45)                                                                                                                                               |                      |                      |                                    |              |                   |                                |                    | 75.00 |
| 76.00                                                                         | Per diem capital-related costs (line 75 ÷ line 2)                                                                                                                                                                                                               |                      |                      |                                    |              |                   |                                |                    | 76.00 |
| 77.00                                                                         | Program capital-related costs (line 9 x line 76)                                                                                                                                                                                                                |                      |                      |                                    |              |                   |                                |                    | 77.00 |
| 78.00                                                                         | Inpatient routine service cost (line 74 minus line 77)                                                                                                                                                                                                          |                      |                      |                                    |              |                   |                                |                    | 78.00 |
| 79.00                                                                         | Aggregate charges to beneficiaries for excess costs (from provider records)                                                                                                                                                                                     |                      |                      |                                    |              |                   |                                |                    | 79.00 |
| 80.00                                                                         | Total Program routine service costs for comparison to the cost limitation (line 78 minus line 79)                                                                                                                                                               |                      |                      |                                    |              |                   |                                |                    | 80.00 |
| 81.00                                                                         | Inpatient routine service cost per diem limitation                                                                                                                                                                                                              |                      |                      |                                    |              |                   |                                |                    | 81.00 |
| 82.00                                                                         | Inpatient routine service cost limitation (line 9 x line 81)                                                                                                                                                                                                    |                      |                      |                                    |              |                   |                                |                    | 82.00 |
| 83.00                                                                         | Reasonable inpatient routine service costs (see instructions)                                                                                                                                                                                                   |                      |                      |                                    |              |                   |                                |                    | 83.00 |
| 84.00                                                                         | Program inpatient ancillary services (see instructions)                                                                                                                                                                                                         |                      |                      |                                    |              |                   |                                |                    | 84.00 |
| 85.00                                                                         | Utilization review - physician compensation (see instructions)                                                                                                                                                                                                  |                      |                      |                                    |              |                   |                                |                    | 85.00 |
| 86.00                                                                         | Total Program inpatient operating costs (sum of lines 83 through 85)                                                                                                                                                                                            |                      |                      |                                    |              |                   |                                |                    | 86.00 |
| PART IV - COMPUTATION OF OBSERVATION BED PASS THROUGH COST                    |                                                                                                                                                                                                                                                                 |                      |                      |                                    |              |                   |                                |                    |       |
| 87.00                                                                         | Total observation bed days (see instructions)                                                                                                                                                                                                                   |                      |                      |                                    |              |                   |                                | 0                  | 87.00 |
| 88.00                                                                         | Adjusted general inpatient routine cost per diem (line 27 ÷ line 2)                                                                                                                                                                                             |                      |                      |                                    |              |                   |                                | 0.00               | 88.00 |
| 89.00                                                                         | Observation bed cost (line 87 x line 88) (see instructions)                                                                                                                                                                                                     |                      |                      |                                    |              |                   |                                | 0                  | 89.00 |

## COMPUTATION OF INPATIENT OPERATING COST

Provider CCN: 14-0119

Period:

Worksheet D-1

Component CCN: 14-T119

From 07/01/2018  
To 06/30/2019Date/Time Prepared:  
11/24/2019 4:22 pm

Title XIX

Subprovider -  
IRF

| Cost Center Description                          |                             | Cost | Routine Cost<br>(from line 21) | column 1 ÷<br>column 2 | Total<br>Observation<br>Bed Cost (from<br>line 89) | Observation<br>Bed Pass<br>Through Cost<br>(col. 3 x col.<br>4) (see<br>instructions) |       |
|--------------------------------------------------|-----------------------------|------|--------------------------------|------------------------|----------------------------------------------------|---------------------------------------------------------------------------------------|-------|
|                                                  |                             | 1.00 | 2.00                           | 3.00                   | 4.00                                               | 5.00                                                                                  |       |
| COMPUTATION OF OBSERVATION BED PASS THROUGH COST |                             |      |                                |                        |                                                    |                                                                                       |       |
| 90.00                                            | Capital-related cost        | 0    | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 90.00 |
| 91.00                                            | Nursing School cost         | 0    | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 91.00 |
| 92.00                                            | Allied health cost          | 0    | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 92.00 |
| 93.00                                            | All other Medical Education | 0    | 0                              | 0.000000               | 0                                                  | 0                                                                                     | 93.00 |

| INPATIENT ANCILLARY SERVICE COST APPORTIONMENT |       | Provider CCN: 14-0119                                              | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-3<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |        |
|------------------------------------------------|-------|--------------------------------------------------------------------|---------------------------------------------|------------------------------------------------------------|--------|
|                                                |       | Title XVIII                                                        | Hospital                                    | PPS                                                        |        |
| Cost Center Description                        |       | Ratio of Cost<br>To Charges                                        | Inpatient<br>Program<br>Charges             | Inpatient<br>Program Costs<br>(col. 1 x col.<br>2)         |        |
|                                                |       | 1.00                                                               | 2.00                                        | 3.00                                                       |        |
| INPATIENT ROUTINE SERVICE COST CENTERS         |       |                                                                    |                                             |                                                            |        |
| 30.00                                          | 03000 | ADULTS & PEDIATRICS                                                | 84,962,639                                  |                                                            | 30.00  |
| 34.00                                          | 03400 | SURGICAL INTENSIVE CARE UNIT                                       | 25,043,708                                  |                                                            | 34.00  |
| 35.00                                          | 02040 | MEDICAL INTENSIVE CARE UNIT                                        | 33,924,297                                  |                                                            | 35.00  |
| 35.01                                          | 02080 | PEDIATRIC INTENSIVE CARE UNIT                                      | 19,468                                      |                                                            | 35.01  |
| 35.02                                          | 02120 | PREMATURE INTENSIVE CARE UNIT                                      | 0                                           |                                                            | 35.02  |
| 40.00                                          | 04000 | SUBPROVIDER - IPF                                                  | 0                                           |                                                            | 40.00  |
| 41.00                                          | 04100 | SUBPROVIDER - IRF                                                  | 0                                           |                                                            | 41.00  |
| 43.00                                          | 04300 | NURSERY                                                            |                                             |                                                            | 43.00  |
| ANCILLARY SERVICE COST CENTERS                 |       |                                                                    |                                             |                                                            |        |
| 50.00                                          | 05000 | OPERATING ROOM                                                     | 73,900,793                                  | 11,719,114                                                 | 50.00  |
| 51.00                                          | 05100 | RECOVERY ROOM                                                      | 8,287,207                                   | 2,797,761                                                  | 51.00  |
| 52.00                                          | 05200 | DELIVERY ROOM & LABOR ROOM                                         | 186,184                                     | 84,952                                                     | 52.00  |
| 53.00                                          | 05300 | ANESTHESIOLOGY                                                     | 21,423,947                                  | 2,603,824                                                  | 53.00  |
| 54.00                                          | 05400 | RADIOLOGY-DIAGNOSTIC                                               | 55,936,133                                  | 7,816,347                                                  | 54.00  |
| 55.00                                          | 05500 | RADIOLOGY-THERAPEUTIC                                              | 1,459,143                                   | 222,853                                                    | 55.00  |
| 56.00                                          | 05600 | RADIOISOTOPE                                                       | 2,029,612                                   | 432,384                                                    | 56.00  |
| 60.00                                          | 06000 | LABORATORY                                                         | 69,920,947                                  | 13,465,865                                                 | 60.00  |
| 60.01                                          | 06002 | LABORATORY - HLA                                                   | 82,257                                      | 35,134                                                     | 60.01  |
| 61.00                                          | 06100 | PBP CLINICAL LAB SERVICES-PRGM ONLY                                | 0                                           | 0                                                          | 61.00  |
| 62.00                                          | 06200 | WHOLE BLOOD & PACKED RED BLOOD CELLS                               | 11,239,036                                  | 3,180,479                                                  | 62.00  |
| 64.00                                          | 06400 | INTRAVENOUS THERAPY                                                | 11,889,525                                  | 461,694                                                    | 64.00  |
| 65.00                                          | 06500 | RESPIRATORY THERAPY                                                | 10,814,956                                  | 3,427,443                                                  | 65.00  |
| 66.00                                          | 06600 | PHYSICAL THERAPY                                                   | 5,530,374                                   | 1,542,394                                                  | 66.00  |
| 67.00                                          | 06700 | OCCUPATIONAL THERAPY                                               | 4,564,718                                   | 1,435,901                                                  | 67.00  |
| 68.00                                          | 06800 | SPEECH PATHOLOGY                                                   | 2,034,047                                   | 762,391                                                    | 68.00  |
| 69.00                                          | 06900 | ELECTROCARDIOLOGY                                                  | 20,627,327                                  | 2,594,010                                                  | 69.00  |
| 70.00                                          | 07000 | ELECTROENCEPHALOGRAPHY                                             | 4,521,429                                   | 675,899                                                    | 70.00  |
| 71.00                                          | 07100 | MEDICAL SUPPLIES CHARGED TO PATIENTS                               | 28,017,489                                  | 9,949,431                                                  | 71.00  |
| 72.00                                          | 07200 | IMPL. DEV. CHARGED TO PATIENTS                                     | 79,182,352                                  | 28,308,720                                                 | 72.00  |
| 73.00                                          | 07300 | DRUGS CHARGED TO PATIENTS                                          | 64,607,216                                  | 17,611,539                                                 | 73.00  |
| 74.00                                          | 07400 | RENAL DIALYSIS                                                     | 0                                           | 0                                                          | 74.00  |
| 76.00                                          | 03020 | RENAL DIALYSIS ADULT                                               | 6,278,092                                   | 1,924,800                                                  | 76.00  |
| 76.01                                          | 03550 | PSYCH DAY HOSPITAL                                                 | 0                                           | 0                                                          | 76.01  |
| OUTPATIENT SERVICE COST CENTERS                |       |                                                                    |                                             |                                                            |        |
| 90.00                                          | 09000 | CLINIC                                                             | 575,746                                     | 222,556                                                    | 90.00  |
| 91.00                                          | 09100 | EMERGENCY                                                          | 16,921,528                                  | 3,410,551                                                  | 91.00  |
| 92.00                                          | 09200 | OBSERVATION BEDS (NON-DISTINCT PART)                               | 0                                           | 0                                                          | 92.00  |
| 92.01                                          | 09201 | OBSERVATION BEDS (DISTINCT PART)                                   | 0                                           | 0                                                          | 92.01  |
| 93.00                                          | 04040 | BEHAVIORAL HEALTH                                                  | 0                                           | 0                                                          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS                |       |                                                                    |                                             |                                                            |        |
| 94.00                                          | 09400 | HOME PROGRAM DIALYSIS                                              | 0                                           | 0                                                          | 94.00  |
| 98.00                                          | 09850 | OTHER REIMBURSABLE COST CENTERS                                    | 0                                           | 0                                                          | 98.00  |
| 200.00                                         |       | Total (sum of lines 50 through 94 and 96 through 98)               | 500,030,058                                 | 114,686,042                                                | 200.00 |
| 201.00                                         |       | Less PBP Clinic Laboratory Services-Program only charges (line 61) | 0                                           | 0                                                          | 201.00 |
| 202.00                                         |       | Net charges (line 200 minus line 201)                              | 500,030,058                                 |                                                            | 202.00 |

| INPATIENT ANCILLARY SERVICE COST APPORTIONMENT |                                                                    | Provider CCN: 14-0119<br>Component CCN: 14-S119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-3<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |        |
|------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|------------------------------------------------------------|--------|
|                                                |                                                                    | Title XVIII                                     | Subprovider -<br>IPF                        | PPS                                                        |        |
| Cost Center Description                        |                                                                    | Ratio of Cost<br>To Charges                     | Inpatient<br>Program<br>Charges             | Inpatient<br>Program Costs<br>(col. 1 x col.<br>2)         |        |
|                                                |                                                                    | 1.00                                            | 2.00                                        | 3.00                                                       |        |
| INPATIENT ROUTINE SERVICE COST CENTERS         |                                                                    |                                                 |                                             |                                                            |        |
| 30.00                                          | 03000 ADULTS & PEDIATRICS                                          |                                                 | 0                                           |                                                            | 30.00  |
| 34.00                                          | 03400 SURGICAL INTENSIVE CARE UNIT                                 |                                                 | 0                                           |                                                            | 34.00  |
| 35.00                                          | 02040 MEDICAL INTENSIVE CARE UNIT                                  |                                                 | 0                                           |                                                            | 35.00  |
| 35.01                                          | 02080 PEDIATRIC INTENSIVE CARE UNIT                                |                                                 | 0                                           |                                                            | 35.01  |
| 35.02                                          | 02120 PREMATURE INTENSIVE CARE UNIT                                |                                                 | 0                                           |                                                            | 35.02  |
| 40.00                                          | 04000 SUBPROVIDER - IPF                                            |                                                 | 3,970,469                                   |                                                            | 40.00  |
| 41.00                                          | 04100 SUBPROVIDER - IRF                                            |                                                 | 0                                           |                                                            | 41.00  |
| 43.00                                          | 04300 NURSERY                                                      |                                                 |                                             |                                                            | 43.00  |
| ANCILLARY SERVICE COST CENTERS                 |                                                                    |                                                 |                                             |                                                            |        |
| 50.00                                          | 05000 OPERATING ROOM                                               | 0.158579                                        | 0                                           | 0                                                          | 50.00  |
| 51.00                                          | 05100 RECOVERY ROOM                                                | 0.337600                                        | 239,050                                     | 80,703                                                     | 51.00  |
| 52.00                                          | 05200 DELIVERY ROOM & LABOR ROOM                                   | 0.456278                                        | 0                                           | 0                                                          | 52.00  |
| 53.00                                          | 05300 ANESTHESIOLOGY                                               | 0.121538                                        | 0                                           | 0                                                          | 53.00  |
| 54.00                                          | 05400 RADIOLOGY-DIAGNOSTIC                                         | 0.139737                                        | 139,622                                     | 19,510                                                     | 54.00  |
| 55.00                                          | 05500 RADIOLOGY-THERAPEUTIC                                        | 0.152729                                        | 0                                           | 0                                                          | 55.00  |
| 56.00                                          | 05600 RADIOISOTOPE                                                 | 0.213038                                        | 0                                           | 0                                                          | 56.00  |
| 60.00                                          | 06000 LABORATORY                                                   | 0.192587                                        | 382,510                                     | 73,666                                                     | 60.00  |
| 60.01                                          | 06002 LABORATORY - HLA                                             | 0.427124                                        | 0                                           | 0                                                          | 60.01  |
| 61.00                                          | 06100 PBP CLINICAL LAB SERVICES-PRGM ONLY                          | 0.000000                                        | 0                                           | 0                                                          | 61.00  |
| 62.00                                          | 06200 WHOLE BLOOD & PACKED RED BLOOD CELLS                         | 0.282985                                        | 387                                         | 110                                                        | 62.00  |
| 64.00                                          | 06400 INTRAVENOUS THERAPY                                          | 0.038832                                        | 31,635                                      | 1,228                                                      | 64.00  |
| 65.00                                          | 06500 RESPIRATORY THERAPY                                          | 0.316917                                        | 21,750                                      | 6,893                                                      | 65.00  |
| 66.00                                          | 06600 PHYSICAL THERAPY                                             | 0.278895                                        | 13,260                                      | 3,698                                                      | 66.00  |
| 67.00                                          | 06700 OCCUPATIONAL THERAPY                                         | 0.314565                                        | 200,706                                     | 63,135                                                     | 67.00  |
| 68.00                                          | 06800 SPEECH PATHOLOGY                                             | 0.374815                                        | 7,922                                       | 2,969                                                      | 68.00  |
| 69.00                                          | 06900 ELECTROCARDIOLOGY                                            | 0.125756                                        | 55,266                                      | 6,950                                                      | 69.00  |
| 70.00                                          | 07000 ELECTROENCEPHALOGRAPHY                                       | 0.149488                                        | 13,940                                      | 2,084                                                      | 70.00  |
| 71.00                                          | 07100 MEDICAL SUPPLIES CHARGED TO PATIENTS                         | 0.355115                                        | 0                                           | 0                                                          | 71.00  |
| 72.00                                          | 07200 IMPL. DEV. CHARGED TO PATIENTS                               | 0.357513                                        | 0                                           | 0                                                          | 72.00  |
| 73.00                                          | 07300 DRUGS CHARGED TO PATIENTS                                    | 0.272594                                        | 441,194                                     | 120,267                                                    | 73.00  |
| 74.00                                          | 07400 RENAL DIALYSIS                                               | 0.000000                                        | 0                                           | 0                                                          | 74.00  |
| 76.00                                          | 03020 RENAL DIALYSIS ADULT                                         | 0.306590                                        | 0                                           | 0                                                          | 76.00  |
| 76.01                                          | 03550 PSYCH DAY HOSPITAL                                           | 8.736276                                        | 251                                         | 2,193                                                      | 76.01  |
| OUTPATIENT SERVICE COST CENTERS                |                                                                    |                                                 |                                             |                                                            |        |
| 90.00                                          | 09000 CLINIC                                                       | 0.386553                                        | 3,872                                       | 1,497                                                      | 90.00  |
| 91.00                                          | 09100 EMERGENCY                                                    | 0.201551                                        | 327,718                                     | 66,052                                                     | 91.00  |
| 92.00                                          | 09200 OBSERVATION BEDS (NON-DISTINCT PART)                         | 0.555909                                        | 0                                           | 0                                                          | 92.00  |
| 92.01                                          | 09201 OBSERVATION BEDS (DISTINCT PART)                             | 0.000000                                        | 0                                           | 0                                                          | 92.01  |
| 93.00                                          | 04040 BEHAVIORAL HEALTH                                            | 0.000000                                        | 0                                           | 0                                                          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS                |                                                                    |                                                 |                                             |                                                            |        |
| 94.00                                          | 09400 HOME PROGRAM DIALYSIS                                        | 0.000000                                        | 0                                           | 0                                                          | 94.00  |
| 98.00                                          | 09850 OTHER REIMBURSABLE COST CENTERS                              | 0.000000                                        | 0                                           | 0                                                          | 98.00  |
| 200.00                                         | Total (sum of lines 50 through 94 and 96 through 98)               |                                                 | 1,879,083                                   | 450,955                                                    | 200.00 |
| 201.00                                         | Less PBP Clinic Laboratory Services-Program only charges (line 61) |                                                 | 0                                           |                                                            | 201.00 |
| 202.00                                         | Net charges (line 200 minus line 201)                              |                                                 | 1,879,083                                   |                                                            | 202.00 |

| INPATIENT ANCILLARY SERVICE COST APPORTIONMENT |                                                                    | Provider CCN: 14-0119<br>Component CCN: 14-T119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet D-3<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |        |
|------------------------------------------------|--------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|------------------------------------------------------------|--------|
|                                                |                                                                    | Title XVIII                                     | Subprovider -<br>IRF                        | PPS                                                        |        |
| Cost Center Description                        |                                                                    | Ratio of Cost<br>To Charges                     | Inpatient<br>Program<br>Charges             | Inpatient<br>Program Costs<br>(col. 1 x col.<br>2)         |        |
|                                                |                                                                    | 1.00                                            | 2.00                                        | 3.00                                                       |        |
| INPATIENT ROUTINE SERVICE COST CENTERS         |                                                                    |                                                 |                                             |                                                            |        |
| 30.00                                          | 03000 ADULTS & PEDIATRICS                                          |                                                 | 0                                           |                                                            | 30.00  |
| 34.00                                          | 03400 SURGICAL INTENSIVE CARE UNIT                                 |                                                 | 0                                           |                                                            | 34.00  |
| 35.00                                          | 02040 MEDICAL INTENSIVE CARE UNIT                                  |                                                 | 0                                           |                                                            | 35.00  |
| 35.01                                          | 02080 PEDIATRIC INTENSIVE CARE UNIT                                |                                                 | 0                                           |                                                            | 35.01  |
| 35.02                                          | 02120 PREMATURE INTENSIVE CARE UNIT                                |                                                 | 0                                           |                                                            | 35.02  |
| 40.00                                          | 04000 SUBPROVIDER - IPF                                            |                                                 | 0                                           |                                                            | 40.00  |
| 41.00                                          | 04100 SUBPROVIDER - IRF                                            |                                                 | 8,808,575                                   |                                                            | 41.00  |
| 43.00                                          | 04300 NURSERY                                                      |                                                 |                                             |                                                            | 43.00  |
| ANCILLARY SERVICE COST CENTERS                 |                                                                    |                                                 |                                             |                                                            |        |
| 50.00                                          | 05000 OPERATING ROOM                                               | 0.158579                                        | 88,066                                      | 13,965                                                     | 50.00  |
| 51.00                                          | 05100 RECOVERY ROOM                                                | 0.337600                                        | 22,596                                      | 7,628                                                      | 51.00  |
| 52.00                                          | 05200 DELIVERY ROOM & LABOR ROOM                                   | 0.456278                                        | 0                                           | 0                                                          | 52.00  |
| 53.00                                          | 05300 ANESTHESIOLOGY                                               | 0.121538                                        | 30,664                                      | 3,727                                                      | 53.00  |
| 54.00                                          | 05400 RADIOLOGY-DIAGNOSTIC                                         | 0.139737                                        | 591,650                                     | 82,675                                                     | 54.00  |
| 55.00                                          | 05500 RADIOLOGY-THERAPEUTIC                                        | 0.152729                                        | 130,555                                     | 19,940                                                     | 55.00  |
| 56.00                                          | 05600 RADIOISOTOPE                                                 | 0.213038                                        | 0                                           | 0                                                          | 56.00  |
| 60.00                                          | 06000 LABORATORY                                                   | 0.192587                                        | 1,116,744                                   | 215,070                                                    | 60.00  |
| 60.01                                          | 06002 LABORATORY - HLA                                             | 0.427124                                        | 0                                           | 0                                                          | 60.01  |
| 61.00                                          | 06100 PBP CLINICAL LAB SERVICES-PRGM ONLY                          | 0.000000                                        | 0                                           | 0                                                          | 61.00  |
| 62.00                                          | 06200 WHOLE BLOOD & PACKED RED BLOOD CELLS                         | 0.282985                                        | 48,493                                      | 13,723                                                     | 62.00  |
| 64.00                                          | 06400 INTRAVENOUS THERAPY                                          | 0.038832                                        | 349,241                                     | 13,562                                                     | 64.00  |
| 65.00                                          | 06500 RESPIRATORY THERAPY                                          | 0.316917                                        | 264,070                                     | 83,688                                                     | 65.00  |
| 66.00                                          | 06600 PHYSICAL THERAPY                                             | 0.278895                                        | 2,385,720                                   | 665,365                                                    | 66.00  |
| 67.00                                          | 06700 OCCUPATIONAL THERAPY                                         | 0.314565                                        | 2,296,539                                   | 722,411                                                    | 67.00  |
| 68.00                                          | 06800 SPEECH PATHOLOGY                                             | 0.374815                                        | 786,132                                     | 294,654                                                    | 68.00  |
| 69.00                                          | 06900 ELECTROCARDIOLOGY                                            | 0.125756                                        | 46,907                                      | 5,899                                                      | 69.00  |
| 70.00                                          | 07000 ELECTROENCEPHALOGRAPHY                                       | 0.149488                                        | 7,961                                       | 1,190                                                      | 70.00  |
| 71.00                                          | 07100 MEDICAL SUPPLIES CHARGED TO PATIENTS                         | 0.355115                                        | 0                                           | 0                                                          | 71.00  |
| 72.00                                          | 07200 IMPL. DEV. CHARGED TO PATIENTS                               | 0.357513                                        | 0                                           | 0                                                          | 72.00  |
| 73.00                                          | 07300 DRUGS CHARGED TO PATIENTS                                    | 0.272594                                        | 1,377,671                                   | 375,545                                                    | 73.00  |
| 74.00                                          | 07400 RENAL DIALYSIS                                               | 0.000000                                        | 0                                           | 0                                                          | 74.00  |
| 76.00                                          | 03020 RENAL DIALYSIS ADULT                                         | 0.306590                                        | 210,040                                     | 64,396                                                     | 76.00  |
| 76.01                                          | 03550 PSYCH DAY HOSPITAL                                           | 8.736276                                        | 0                                           | 0                                                          | 76.01  |
| OUTPATIENT SERVICE COST CENTERS                |                                                                    |                                                 |                                             |                                                            |        |
| 90.00                                          | 09000 CLINIC                                                       | 0.386553                                        | 108                                         | 42                                                         | 90.00  |
| 91.00                                          | 09100 EMERGENCY                                                    | 0.201551                                        | 0                                           | 0                                                          | 91.00  |
| 92.00                                          | 09200 OBSERVATION BEDS (NON-DISTINCT PART)                         | 0.555909                                        | 0                                           | 0                                                          | 92.00  |
| 92.01                                          | 09201 OBSERVATION BEDS (DISTINCT PART)                             | 0.000000                                        | 0                                           | 0                                                          | 92.01  |
| 93.00                                          | 04040 BEHAVIORAL HEALTH                                            | 0.000000                                        | 0                                           | 0                                                          | 93.00  |
| OTHER REIMBURSABLE COST CENTERS                |                                                                    |                                                 |                                             |                                                            |        |
| 94.00                                          | 09400 HOME PROGRAM DIALYSIS                                        | 0.000000                                        | 0                                           | 0                                                          | 94.00  |
| 98.00                                          | 09850 OTHER REIMBURSABLE COST CENTERS                              | 0.000000                                        | 0                                           | 0                                                          | 98.00  |
| 200.00                                         | Total (sum of lines 50 through 94 and 96 through 98)               |                                                 | 9,753,157                                   | 2,583,480                                                  | 200.00 |
| 201.00                                         | Less PBP Clinic Laboratory Services-Program only charges (line 61) |                                                 | 0                                           |                                                            | 201.00 |
| 202.00                                         | Net charges (line 200 minus line 201)                              |                                                 | 9,753,157                                   |                                                            | 202.00 |

COMPUTATION OF ORGAN ACQUISITION COSTS AND CHARGES FOR HOSPITALS  
WHICH ARE CERTIFIED TRANSPLANT CENTERS

Provider CCN: 14-0119

Period:

Worksheet D-4

Component CCN:

From 07/01/2018

Date/Time Prepared:

To 06/30/2019

11/24/2019 4:22 pm

| Cost Center Description                                                                    |                                      | Kidney                        |                                            | Hospital                                       |                                            | PPS                       |      |
|--------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------|--------------------------------------------|------------------------------------------------|--------------------------------------------|---------------------------|------|
|                                                                                            |                                      | Worksheet D-1<br>Line Numbers | Inpatient<br>Routine Organ<br>Charges      | Per Diem Costs<br>(from Wkst.<br>D-1, Part II) | Organ<br>Acquisition                       | Cost (col. 2 x<br>col. 3) |      |
|                                                                                            |                                      | 0                             | 1.00                                       | 2.00                                           | 3.00                                       | 4.00                      |      |
| PART I - COMPUTATION OF ORGAN ACQUISITION COSTS (INPATIENT ROUTINE AND ANCILLARY SERVICES) |                                      |                               |                                            |                                                |                                            |                           |      |
| Computation of Inpatient Routine Service Costs Applicable to Organ Acquisition             |                                      |                               |                                            |                                                |                                            |                           |      |
| 1.00                                                                                       | ADULTS & PEDIATRICS                  | 38.00                         | 92,925                                     | 1,304.71                                       | 41                                         | 53,493                    | 1.00 |
| 2.00                                                                                       | INTENSIVE CARE UNIT                  | 43.00                         | 0                                          | 0.00                                           | 0                                          | 0                         | 2.00 |
| 3.00                                                                                       | CORONARY CARE UNIT                   | 44.00                         | 0                                          | 0.00                                           | 0                                          | 0                         | 3.00 |
| 4.00                                                                                       | BURN INTENSIVE CARE UNIT             | 45.00                         | 0                                          | 0.00                                           | 0                                          | 0                         | 4.00 |
| 5.00                                                                                       | SURGICAL INTENSIVE CARE UNIT         | 46.00                         | 156,095                                    | 2,010.23                                       | 32                                         | 64,327                    | 5.00 |
| 6.00                                                                                       | MEDICAL INTENSIVE CARE UNIT          | 47.00                         | 0                                          | 2,115.86                                       | 0                                          | 0                         | 6.00 |
| 6.01                                                                                       | PEDIATRIC INTENSIVE CARE UNIT        | 47.01                         | 0                                          | 2,407.66                                       | 0                                          | 0                         | 6.01 |
| 6.02                                                                                       | PREMATURE INTENSIVE CARE UNIT        | 47.02                         | 0                                          | 1,627.08                                       | 0                                          | 0                         | 6.02 |
| 7.00                                                                                       | TOTAL (sum of lines 1 through 6)     |                               | 249,020                                    |                                                | 73                                         | 117,820                   | 7.00 |
| Cost Center Description                                                                    |                                      | Worksheet C<br>Line Numbers   | Ratio of<br>Cost/Charges<br>(from Wkst. C) | Organ<br>Acquisition<br>Ancillary<br>Charges   | Organ<br>Acquisition<br>Ancillary<br>Costs |                           |      |
|                                                                                            |                                      |                               |                                            |                                                |                                            |                           |      |
|                                                                                            |                                      | 0                             | 1.00                                       | 2.00                                           | 3.00                                       |                           |      |
| Computation of Ancillary Service Cost Applicable to Organ Acquisition                      |                                      |                               |                                            |                                                |                                            |                           |      |
| 8.00                                                                                       | OPERATING ROOM                       | 50.00                         | 0.158579                                   | 1,169,921                                      | 185,525                                    | 8.00                      |      |
| 9.00                                                                                       | RECOVERY ROOM                        | 51.00                         | 0.337600                                   | 320,618                                        | 108,241                                    | 9.00                      |      |
| 10.00                                                                                      | DELIVERY ROOM & LABOR ROOM           | 52.00                         | 0.456278                                   | 0                                              | 0                                          | 10.00                     |      |
| 11.00                                                                                      | ANESTHESIOLOGY                       | 53.00                         | 0.121538                                   | 232,738                                        | 28,287                                     | 11.00                     |      |
| 12.00                                                                                      | RADIOLOGY-DIAGNOSTIC                 | 54.00                         | 0.139555                                   | 1,127,269                                      | 157,316                                    | 12.00                     |      |
| 13.00                                                                                      | RADIOLOGY-THERAPEUTIC                | 55.00                         | 0.152729                                   | 0                                              | 0                                          | 13.00                     |      |
| 14.00                                                                                      | RADIOISOTOPE                         | 56.00                         | 0.213038                                   | 2,405,774                                      | 512,521                                    | 14.00                     |      |
| 15.00                                                                                      | CT SCAN                              | 57.00                         | 0.000000                                   | 0                                              | 0                                          | 15.00                     |      |
| 16.00                                                                                      | MAGNETIC RESONANCE IMAGING (MRI)     | 58.00                         | 0.000000                                   | 0                                              | 0                                          | 16.00                     |      |
| 17.00                                                                                      | CARDIAC CATHETERIZATION              | 59.00                         | 0.000000                                   | 0                                              | 0                                          | 17.00                     |      |
| 18.00                                                                                      | LABORATORY                           | 60.00                         | 0.191336                                   | 6,243,537                                      | 1,194,613                                  | 18.00                     |      |
| 18.01                                                                                      | LABORATORY - HLA                     | 60.01                         | 0.427124                                   | 3,277,864                                      | 1,400,054                                  | 18.01                     |      |
| 19.00                                                                                      | PBP CLINICAL LAB SERVICES-PRGM ONLY  | 61.00                         | 0.000000                                   | 0                                              | 0                                          | 19.00                     |      |
| 20.00                                                                                      | WHOLE BLOOD & PACKED RED BLOOD CELLS | 62.00                         | 0.282719                                   | 145,295                                        | 41,078                                     | 20.00                     |      |
| 21.00                                                                                      | BLOOD STORING, PROCESSING & TRANS.   | 63.00                         | 0.000000                                   | 0                                              | 0                                          | 21.00                     |      |
| 22.00                                                                                      | INTRAVENOUS THERAPY                  | 64.00                         | 0.038832                                   | 22,364                                         | 868                                        | 22.00                     |      |
| 23.00                                                                                      | RESPIRATORY THERAPY                  | 65.00                         | 0.316917                                   | 41,121                                         | 13,032                                     | 23.00                     |      |
| 24.00                                                                                      | PHYSICAL THERAPY                     | 66.00                         | 0.278895                                   | 520                                            | 145                                        | 24.00                     |      |
| 25.00                                                                                      | OCCUPATIONAL THERAPY                 | 67.00                         | 0.314565                                   | 0                                              | 0                                          | 25.00                     |      |
| 26.00                                                                                      | SPEECH PATHOLOGY                     | 68.00                         | 0.374815                                   | 0                                              | 0                                          | 26.00                     |      |
| 27.00                                                                                      | ELECTROCARDIOLOGY                    | 69.00                         | 0.125452                                   | 1,314,560                                      | 164,914                                    | 27.00                     |      |
| 28.00                                                                                      | ELECTROENCEPHALOGRAPHY               | 70.00                         | 0.149488                                   | 0                                              | 0                                          | 28.00                     |      |
| 29.00                                                                                      | MEDICAL SUPPLIES CHARGED TO PATIENTS | 71.00                         | 0.355115                                   | 330,219                                        | 117,266                                    | 29.00                     |      |
| 30.00                                                                                      | IMPL. DEV. CHARGED TO PATIENTS       | 72.00                         | 0.357513                                   | 66,934                                         | 23,930                                     | 30.00                     |      |
| 31.00                                                                                      | DRUGS CHARGED TO PATIENTS            | 73.00                         | 0.272594                                   | 862,648                                        | 235,153                                    | 31.00                     |      |
| 32.00                                                                                      | RENAL DIALYSIS                       | 74.00                         | 0.000000                                   | 0                                              | 0                                          | 32.00                     |      |
| 33.00                                                                                      | ASC (NON-DISTINCT PART)              | 75.00                         | 0.000000                                   | 0                                              | 0                                          | 33.00                     |      |
| 34.00                                                                                      | RENAL DIALYSIS ADULT                 | 76.00                         | 0.306590                                   | 10,126                                         | 3,105                                      | 34.00                     |      |
| 34.01                                                                                      | PSYCH DAY HOSPITAL                   | 76.01                         | 8.722772                                   | 0                                              | 0                                          | 34.01                     |      |
| 35.00                                                                                      | RURAL HEALTH CLINIC                  | 88.00                         | 0.000000                                   | 0                                              | 0                                          | 35.00                     |      |
| 36.00                                                                                      | FEDERALLY QUALIFIED HEALTH CENTER    | 89.00                         | 0.000000                                   | 0                                              | 0                                          | 36.00                     |      |
| 37.00                                                                                      | CLINIC                               | 90.00                         | 0.386418                                   | 466,098                                        | 180,109                                    | 37.00                     |      |
| 38.00                                                                                      | EMERGENCY                            | 91.00                         | 0.201332                                   | 11,490                                         | 2,313                                      | 38.00                     |      |
| 39.00                                                                                      | OBSERVATION BEDS (NON-DISTINCT PART) | 92.00                         | 0.555909                                   | 47,069                                         | 26,166                                     | 39.00                     |      |
| 39.01                                                                                      | OBSERVATION BEDS (DISTINCT PART)     | 92.01                         | 0.000000                                   | 0                                              | 0                                          | 39.01                     |      |
| 40.00                                                                                      | BEHAVIORAL HEALTH                    | 93.00                         | 0.000000                                   | 0                                              | 0                                          | 40.00                     |      |
| 41.00                                                                                      | TOTAL (sum of lines 8 through 40)    |                               |                                            | 18,096,165                                     | 4,394,636                                  | 41.00                     |      |

(1) Organs procured outside your center by a procurement team from your center are not to be included in the count.

(2) Organs procured outside your center by a procurement team from your center are included in the count.

COMPUTATION OF ORGAN ACQUISITION COSTS AND CHARGES FOR HOSPITALS  
WHICH ARE CERTIFIED TRANSPLANT CENTERS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet D-4

Component CCN:

Date/Time Prepared:  
11/24/2019 4:22 pm

|                                                                                                              |                                                                            | Kidney                                   |                                                                   | Hospital                                                            |                                                    | PPS |       |
|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------------|-----|-------|
| Cost Center Description                                                                                      |                                                                            | Worksheet D-2,<br>Part I Line<br>Numbers | Average Cost<br>Per Day (from<br>Wkst. D-2,<br>Part I, col.<br>4) | Organ<br>Acquisition                                                | Organ<br>Acquisition<br>Costs (col. 1<br>x col. 2) |     |       |
|                                                                                                              |                                                                            | 0                                        | 1.00                                                              | 2.00                                                                | 3.00                                               |     |       |
| PART II - COMPUTATION OF ORGAN ACQUISITION COSTS (OTHER THAN INPATIENT ROUTINE AND ANCILLARY SERVICES COSTS) |                                                                            |                                          |                                                                   |                                                                     |                                                    |     |       |
| Computation of the Cost of Inpatient Services of Interns and Residents Not In Approved Teaching Program      |                                                                            |                                          |                                                                   |                                                                     |                                                    |     |       |
| 42.00                                                                                                        | ADULTS & PEDIATRICS                                                        | 2.00                                     | 0.00                                                              | 41                                                                  | 0                                                  | 0   | 42.00 |
| 43.00                                                                                                        | INTENSIVE CARE UNIT                                                        | 3.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 43.00 |
| 44.00                                                                                                        | CORONARY CARE UNIT                                                         | 4.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 44.00 |
| 45.00                                                                                                        | BURN INTENSIVE CARE UNIT                                                   | 5.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 45.00 |
| 46.00                                                                                                        | SURGICAL INTENSIVE CARE UNIT                                               | 6.00                                     | 0.00                                                              | 32                                                                  | 0                                                  | 0   | 46.00 |
| 47.00                                                                                                        | MEDICAL INTENSIVE CARE UNIT                                                | 7.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 47.00 |
| 47.01                                                                                                        | PEDIATRIC INTENSIVE CARE UNIT                                              | 7.01                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 47.01 |
| 47.02                                                                                                        | PREMATURE INTENSIVE CARE UNIT                                              | 7.02                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 47.02 |
| 48.00                                                                                                        | TOTAL (sum of lines 42 through 47)                                         |                                          |                                                                   | 73                                                                  | 0                                                  | 0   | 48.00 |
| Cost Center Description                                                                                      |                                                                            | Worksheet D-2,<br>Part I Line<br>Numbers | Organ Charges<br>(see<br>instructions)                            | Ratio of Cost<br>To Charges<br>from Wkst.<br>D-2, Part I,<br>col. 4 | Organ<br>Acquisition<br>Costs (col. 1<br>x col. 2) |     |       |
|                                                                                                              |                                                                            | 0                                        | 1.00                                                              | 2.00                                                                | 3.00                                               |     |       |
| Computation of the Cost of Outpatient Services of Interns and Residents Not In Approved Teaching Program     |                                                                            |                                          |                                                                   |                                                                     |                                                    |     |       |
| 49.00                                                                                                        | RURAL HEALTH CLINIC                                                        | 21.00                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 0   | 49.00 |
| 50.00                                                                                                        | FEDERALLY QUALIFIED HEALTH CENTER                                          | 22.00                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 0   | 50.00 |
| 51.00                                                                                                        | CLINIC                                                                     | 23.00                                    | 466,098                                                           | 0.000000                                                            | 0                                                  | 0   | 51.00 |
| 52.00                                                                                                        | EMERGENCY                                                                  | 24.00                                    | 11,490                                                            | 0.000000                                                            | 0                                                  | 0   | 52.00 |
| 53.00                                                                                                        | OBSERVATION BEDS (NON-DISTINCT PART)                                       | 25.00                                    | 47,069                                                            | 0.000000                                                            | 0                                                  | 0   | 53.00 |
| 53.01                                                                                                        | OBSERVATION BEDS (DISTINCT PART)                                           | 25.01                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 0   | 53.01 |
| 54.00                                                                                                        | BEHAVIORAL HEALTH                                                          | 26.00                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 0   | 54.00 |
| 55.00                                                                                                        | TOTAL (sum of lines 49 through 52)                                         |                                          | 524,657                                                           |                                                                     | 0                                                  | 0   | 55.00 |
| Cost Center Description                                                                                      |                                                                            | Cost                                     |                                                                   | Charges                                                             |                                                    |     |       |
|                                                                                                              |                                                                            | Part A                                   | Part B                                                            | Part A                                                              | Part B                                             |     |       |
|                                                                                                              |                                                                            | 1.00                                     | 2.00                                                              | 3.00                                                                | 4.00                                               |     |       |
| PART III - SUMMARY OF COSTS AND CHARGES                                                                      |                                                                            |                                          |                                                                   |                                                                     |                                                    |     |       |
| 56.00                                                                                                        | Routine and Ancillary from Part I                                          | 4,512,456                                |                                                                   | 18,345,185                                                          |                                                    | 0   | 56.00 |
| 57.00                                                                                                        | Interns and Residents (inpatient)                                          | 0                                        |                                                                   | 0                                                                   |                                                    | 0   | 57.00 |
| 58.00                                                                                                        | Interns and Residents (outpatient)                                         | 0                                        |                                                                   | 0                                                                   |                                                    | 0   | 58.00 |
| 59.00                                                                                                        | Direct Organ Acquisition (see instructions)                                | 7,740,599                                |                                                                   | 14,129,000                                                          |                                                    | 0   | 59.00 |
| 60.00                                                                                                        | Cost of physicians' services in a teaching hospital (see intructions)      | 0                                        |                                                                   | 0                                                                   |                                                    | 0   | 60.00 |
| 61.00                                                                                                        | Total (sum of lines 56 thru 60)                                            | 12,253,055                               |                                                                   | 32,474,185                                                          |                                                    | 0   | 61.00 |
| 62.00                                                                                                        | Total Usable Organs (see instructions)                                     |                                          | 186                                                               |                                                                     |                                                    | 0   | 62.00 |
| 63.00                                                                                                        | Medicare Usable Organs (see instructions)                                  |                                          | 147                                                               |                                                                     |                                                    | 0   | 63.00 |
| 64.00                                                                                                        | Ratio of Medicare Usable Organs to Total Usable Organs (line 63 ÷ line 62) |                                          | 0.790323                                                          |                                                                     |                                                    | 0   | 64.00 |
| 65.00                                                                                                        | Medicare Cost/Charges (see instructions)                                   | 9,683,871                                |                                                                   | 25,665,095                                                          |                                                    | 0   | 65.00 |
| 66.00                                                                                                        | Revenue for Organs Sold                                                    | 276,846                                  |                                                                   | 276,846                                                             |                                                    | 0   | 66.00 |
| 67.00                                                                                                        | Subtotal (line 65 minus line 66)                                           | 9,407,025                                |                                                                   | 25,388,249                                                          |                                                    | 0   | 67.00 |
| 68.00                                                                                                        | Organs Furnished Part B                                                    | 0                                        | 0                                                                 | 0                                                                   | 0                                                  | 0   | 68.00 |
| 69.00                                                                                                        | Net Organ Acquisition Cost and Charges (see instructions)                  | 9,407,025                                | 0                                                                 | 25,388,249                                                          | 0                                                  | 0   | 69.00 |
| Cost Center Description                                                                                      |                                                                            |                                          | Living Related                                                    | Cadaveric                                                           | Revenue                                            |     |       |
|                                                                                                              |                                                                            |                                          | 1.00                                                              | 2.00                                                                | 3.00                                               |     |       |
| PART IV - STATISTICS                                                                                         |                                                                            |                                          |                                                                   |                                                                     |                                                    |     |       |
| 70.00                                                                                                        | Organs Excised in Provider (1)                                             |                                          | 27                                                                | 51                                                                  |                                                    | 0   | 70.00 |
| 71.00                                                                                                        | Organs Purchased from Other Transplant Hospitals (2)                       |                                          | 10                                                                | 0                                                                   |                                                    | 0   | 71.00 |
| 72.00                                                                                                        | Organs Purchased from Non-Transplant Hospitals                             |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 72.00 |
| 73.00                                                                                                        | Organs Purchased from OPOs                                                 |                                          | 0                                                                 | 98                                                                  |                                                    | 0   | 73.00 |
| 74.00                                                                                                        | Total (sum of lines 70 through 73)                                         |                                          | 37                                                                | 149                                                                 |                                                    | 0   | 74.00 |
| 75.00                                                                                                        | Organs Transplanted                                                        |                                          | 27                                                                | 98                                                                  |                                                    | 0   | 75.00 |
| 76.00                                                                                                        | Organs Sold to Other Hospitals                                             |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 76.00 |
| 77.00                                                                                                        | Organs Sold to OPOs                                                        |                                          | 0                                                                 | 51                                                                  | 144,588                                            | 0   | 77.00 |
| 78.00                                                                                                        | Organs Sold to Transplant Hospitals                                        |                                          | 10                                                                | 0                                                                   | 132,258                                            | 0   | 78.00 |
| 79.00                                                                                                        | Organs Sold to Military or VA Hospitals                                    |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 79.00 |
| 80.00                                                                                                        | Organs Sold Outside the U.S.                                               |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 80.00 |
| 81.00                                                                                                        | Organs Sent Outside the U.S. (no revenue received)                         |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 81.00 |
| 82.00                                                                                                        | Organs Used for Research                                                   |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 82.00 |
| 83.00                                                                                                        | Unusable/Discarded Organs                                                  |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 83.00 |
| 84.00                                                                                                        | Total (sum of lines 75 through 83 should equal line 74)                    |                                          | 37                                                                | 149                                                                 |                                                    | 0   | 84.00 |

(1) Organs procured outside your center by a procurement team from your center are not to be included in the count.

(2) Organs procured outside your center by a procurement team from your center are included in the count.

COMPUTATION OF ORGAN ACQUISITION COSTS AND CHARGES FOR HOSPITALS  
WHICH ARE CERTIFIED TRANSPLANT CENTERS

Provider CCN: 14-0119

Period:

Worksheet D-4

Component CCN:

From 07/01/2018

Date/Time Prepared:

To 06/30/2019

11/24/2019 4:22 pm

|                                                                                            |                                      |                               | Liver                                 |                                                | Hospital                                     | PPS                                        |       |
|--------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------|---------------------------------------|------------------------------------------------|----------------------------------------------|--------------------------------------------|-------|
| Cost Center Description                                                                    |                                      | Worksheet D-1<br>Line Numbers | Inpatient<br>Routine Organ<br>Charges | Per Diem Costs<br>(from Wkst.<br>D-1, Part II) | Organ<br>Acquisition                         | Cost (col. 2 x<br>col. 3)                  |       |
|                                                                                            |                                      | 0                             | 1.00                                  | 2.00                                           | 3.00                                         | 4.00                                       |       |
| PART I - COMPUTATION OF ORGAN ACQUISITION COSTS (INPATIENT ROUTINE AND ANCILLARY SERVICES) |                                      |                               |                                       |                                                |                                              |                                            |       |
| Computation of Inpatient Routine Service Costs Applicable to Organ Acquisition             |                                      |                               |                                       |                                                |                                              |                                            |       |
| 1.00                                                                                       | ADULTS & PEDIATRICS                  | 38.00                         | 30,095                                | 1,304.71                                       | 13                                           | 16,961                                     | 1.00  |
| 2.00                                                                                       | INTENSIVE CARE UNIT                  | 43.00                         | 0                                     | 0.00                                           | 0                                            | 0                                          | 2.00  |
| 3.00                                                                                       | CORONARY CARE UNIT                   | 44.00                         | 0                                     | 0.00                                           | 0                                            | 0                                          | 3.00  |
| 4.00                                                                                       | BURN INTENSIVE CARE UNIT             | 45.00                         | 0                                     | 0.00                                           | 0                                            | 0                                          | 4.00  |
| 5.00                                                                                       | SURGICAL INTENSIVE CARE UNIT         | 46.00                         | 77,621                                | 2,010.23                                       | 16                                           | 32,164                                     | 5.00  |
| 6.00                                                                                       | MEDICAL INTENSIVE CARE UNIT          | 47.00                         | 0                                     | 2,115.86                                       | 0                                            | 0                                          | 6.00  |
| 6.01                                                                                       | PEDIATRIC INTENSIVE CARE UNIT        | 47.01                         | 0                                     | 2,407.66                                       | 0                                            | 0                                          | 6.01  |
| 6.02                                                                                       | PREMATURE INTENSIVE CARE UNIT        | 47.02                         | 0                                     | 1,627.08                                       | 0                                            | 0                                          | 6.02  |
| 7.00                                                                                       | TOTAL (sum of lines 1 through 6)     |                               | 107,716                               |                                                | 29                                           | 49,125                                     | 7.00  |
| Cost Center Description                                                                    |                                      |                               | Worksheet C<br>Line Numbers           | Ratio of<br>Cost/Charges<br>(from Wkst. C)     | Organ<br>Acquisition<br>Ancillary<br>Charges | Organ<br>Acquisition<br>Ancillary<br>Costs |       |
|                                                                                            |                                      |                               | 0                                     | 1.00                                           | 2.00                                         | 3.00                                       |       |
| Computation of Ancillary Service Cost Applicable to Organ Acquisition                      |                                      |                               |                                       |                                                |                                              |                                            |       |
| 8.00                                                                                       | OPERATING ROOM                       |                               | 50.00                                 | 0.158579                                       | 134,078                                      | 21,262                                     | 8.00  |
| 9.00                                                                                       | RECOVERY ROOM                        |                               | 51.00                                 | 0.337600                                       | 42,532                                       | 14,359                                     | 9.00  |
| 10.00                                                                                      | DELIVERY ROOM & LABOR ROOM           |                               | 52.00                                 | 0.456278                                       | 0                                            | 0                                          | 10.00 |
| 11.00                                                                                      | ANESTHESIOLOGY                       |                               | 53.00                                 | 0.121538                                       | 22,690                                       | 2,758                                      | 11.00 |
| 12.00                                                                                      | RADIOLOGY-DIAGNOSTIC                 |                               | 54.00                                 | 0.139555                                       | 158,458                                      | 22,114                                     | 12.00 |
| 13.00                                                                                      | RADIOLOGY-THERAPEUTIC                |                               | 55.00                                 | 0.152729                                       | 0                                            | 0                                          | 13.00 |
| 14.00                                                                                      | RADIOISOTOPE                         |                               | 56.00                                 | 0.213038                                       | 22,940                                       | 4,887                                      | 14.00 |
| 15.00                                                                                      | CT SCAN                              |                               | 57.00                                 | 0.000000                                       | 0                                            | 0                                          | 15.00 |
| 16.00                                                                                      | MAGNETIC RESONANCE IMAGING (MRI)     |                               | 58.00                                 | 0.000000                                       | 0                                            | 0                                          | 16.00 |
| 17.00                                                                                      | CARDIAC CATHETERIZATION              |                               | 59.00                                 | 0.000000                                       | 0                                            | 0                                          | 17.00 |
| 18.00                                                                                      | LABORATORY                           |                               | 60.00                                 | 0.191336                                       | 1,104,340                                    | 211,300                                    | 18.00 |
| 18.01                                                                                      | LABORATORY - HLA                     |                               | 60.01                                 | 0.427124                                       | 29,558                                       | 12,625                                     | 18.01 |
| 19.00                                                                                      | PBP CLINICAL LAB SERVICES-PRGM ONLY  |                               | 61.00                                 | 0.000000                                       | 0                                            | 0                                          | 19.00 |
| 20.00                                                                                      | WHOLE BLOOD & PACKED RED BLOOD CELLS |                               | 62.00                                 | 0.282719                                       | 34,219                                       | 9,674                                      | 20.00 |
| 21.00                                                                                      | BLOOD STORING, PROCESSING & TRANS.   |                               | 63.00                                 | 0.000000                                       | 0                                            | 0                                          | 21.00 |
| 22.00                                                                                      | INTRAVENOUS THERAPY                  |                               | 64.00                                 | 0.038832                                       | 14,422                                       | 560                                        | 22.00 |
| 23.00                                                                                      | RESPIRATORY THERAPY                  |                               | 65.00                                 | 0.316917                                       | 24,301                                       | 7,701                                      | 23.00 |
| 24.00                                                                                      | PHYSICAL THERAPY                     |                               | 66.00                                 | 0.278895                                       | 520                                          | 145                                        | 24.00 |
| 25.00                                                                                      | OCCUPATIONAL THERAPY                 |                               | 67.00                                 | 0.314565                                       | 0                                            | 0                                          | 25.00 |
| 26.00                                                                                      | SPEECH PATHOLOGY                     |                               | 68.00                                 | 0.374815                                       | 0                                            | 0                                          | 26.00 |
| 27.00                                                                                      | ELECTROCARDIOLOGY                    |                               | 69.00                                 | 0.125452                                       | 265,073                                      | 33,254                                     | 27.00 |
| 28.00                                                                                      | ELECTROENCEPHALOGRAPHY               |                               | 70.00                                 | 0.149488                                       | 0                                            | 0                                          | 28.00 |
| 29.00                                                                                      | MEDICAL SUPPLIES CHARGED TO PATIENTS |                               | 71.00                                 | 0.355115                                       | 38,210                                       | 13,569                                     | 29.00 |
| 30.00                                                                                      | IMPL. DEV. CHARGED TO PATIENTS       |                               | 72.00                                 | 0.357513                                       | 13,492                                       | 4,824                                      | 30.00 |
| 31.00                                                                                      | DRUGS CHARGED TO PATIENTS            |                               | 73.00                                 | 0.272594                                       | 112,329                                      | 30,620                                     | 31.00 |
| 32.00                                                                                      | RENAL DIALYSIS                       |                               | 74.00                                 | 0.000000                                       | 0                                            | 0                                          | 32.00 |
| 33.00                                                                                      | ASC (NON-DISTINCT PART)              |                               | 75.00                                 | 0.000000                                       | 0                                            | 0                                          | 33.00 |
| 34.00                                                                                      | RENAL DIALYSIS ADULT                 |                               | 76.00                                 | 0.306590                                       | 3,067                                        | 940                                        | 34.00 |
| 34.01                                                                                      | PSYCH DAY HOSPITAL                   |                               | 76.01                                 | 8.722772                                       | 0                                            | 0                                          | 34.01 |
| 35.00                                                                                      | RURAL HEALTH CLINIC                  |                               | 88.00                                 | 0.000000                                       | 0                                            | 0                                          | 35.00 |
| 36.00                                                                                      | FEDERALLY QUALIFIED HEALTH CENTER    |                               | 89.00                                 | 0.000000                                       | 0                                            | 0                                          | 36.00 |
| 37.00                                                                                      | CLINIC                               |                               | 90.00                                 | 0.386418                                       | 67,469                                       | 26,071                                     | 37.00 |
| 38.00                                                                                      | EMERGENCY                            |                               | 91.00                                 | 0.201332                                       | 5,855                                        | 1,179                                      | 38.00 |
| 39.00                                                                                      | OBSERVATION BEDS (NON-DISTINCT PART) |                               | 92.00                                 | 0.555909                                       | 5,534                                        | 3,076                                      | 39.00 |
| 39.01                                                                                      | OBSERVATION BEDS (DISTINCT PART)     |                               | 92.01                                 | 0.000000                                       | 0                                            | 0                                          | 39.01 |
| 40.00                                                                                      | BEHAVIORAL HEALTH                    |                               | 93.00                                 | 0.000000                                       | 0                                            | 0                                          | 40.00 |
| 41.00                                                                                      | TOTAL (sum of lines 8 through 40)    |                               |                                       |                                                | 2,099,087                                    | 420,918                                    | 41.00 |

(1) Organs procured outside your center by a procurement team from your center are not to be included in the count.

(2) Organs procured outside your center by a procurement team from your center are included in the count.

COMPUTATION OF ORGAN ACQUISITION COSTS AND CHARGES FOR HOSPITALS  
WHICH ARE CERTIFIED TRANSPLANT CENTERS

Provider CCN: 14-0119

Period:

From 07/01/2018

To 06/30/2019

Worksheet D-4

Date/Time Prepared:

11/24/2019 4:22 pm

|                                                                                                              |                                                                            | Liver                                    |                                                                   | Hospital                                                            |                                                    | PPS   |  |
|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------------|-------|--|
| Cost Center Description                                                                                      |                                                                            | Worksheet D-2,<br>Part I Line<br>Numbers | Average Cost<br>Per Day (from<br>Wkst. D-2,<br>Part I, col.<br>4) | Organ<br>Acquisition                                                | Organ<br>Acquisition<br>Costs (col. 1<br>x col. 2) |       |  |
|                                                                                                              |                                                                            | 0                                        | 1.00                                                              | 2.00                                                                | 3.00                                               |       |  |
| PART II - COMPUTATION OF ORGAN ACQUISITION COSTS (OTHER THAN INPATIENT ROUTINE AND ANCILLARY SERVICES COSTS) |                                                                            |                                          |                                                                   |                                                                     |                                                    |       |  |
| Computation of the Cost of Inpatient Services of Interns and Residents Not In Approved Teaching Program      |                                                                            |                                          |                                                                   |                                                                     |                                                    |       |  |
| 42.00                                                                                                        | ADULTS & PEDIATRICS                                                        | 2.00                                     | 0.00                                                              | 13                                                                  | 0                                                  | 42.00 |  |
| 43.00                                                                                                        | INTENSIVE CARE UNIT                                                        | 3.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 43.00 |  |
| 44.00                                                                                                        | CORONARY CARE UNIT                                                         | 4.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 44.00 |  |
| 45.00                                                                                                        | BURN INTENSIVE CARE UNIT                                                   | 5.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 45.00 |  |
| 46.00                                                                                                        | SURGICAL INTENSIVE CARE UNIT                                               | 6.00                                     | 0.00                                                              | 16                                                                  | 0                                                  | 46.00 |  |
| 47.00                                                                                                        | MEDICAL INTENSIVE CARE UNIT                                                | 7.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 47.00 |  |
| 47.01                                                                                                        | PEDIATRIC INTENSIVE CARE UNIT                                              | 7.01                                     | 0.00                                                              | 0                                                                   | 0                                                  | 47.01 |  |
| 47.02                                                                                                        | PREMATURE INTENSIVE CARE UNIT                                              | 7.02                                     | 0.00                                                              | 0                                                                   | 0                                                  | 47.02 |  |
| 48.00                                                                                                        | TOTAL (sum of lines 42 through 47)                                         |                                          |                                                                   | 29                                                                  | 0                                                  | 48.00 |  |
| Cost Center Description                                                                                      |                                                                            | Worksheet D-2,<br>Part I Line<br>Numbers | Organ Charges<br>(see<br>instructions)                            | Ratio of Cost<br>To Charges<br>from Wkst.<br>D-2, Part I,<br>col. 4 | Organ<br>Acquisition<br>Costs (col. 1<br>x col. 2) |       |  |
|                                                                                                              |                                                                            | 0                                        | 1.00                                                              | 2.00                                                                | 3.00                                               |       |  |
| Computation of the Cost of Outpatient Services of Interns and Residents Not In Approved Teaching Program     |                                                                            |                                          |                                                                   |                                                                     |                                                    |       |  |
| 49.00                                                                                                        | RURAL HEALTH CLINIC                                                        | 21.00                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 49.00 |  |
| 50.00                                                                                                        | FEDERALLY QUALIFIED HEALTH CENTER                                          | 22.00                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 50.00 |  |
| 51.00                                                                                                        | CLINIC                                                                     | 23.00                                    | 67,469                                                            | 0.000000                                                            | 0                                                  | 51.00 |  |
| 52.00                                                                                                        | EMERGENCY                                                                  | 24.00                                    | 5,855                                                             | 0.000000                                                            | 0                                                  | 52.00 |  |
| 53.00                                                                                                        | OBSERVATION BEDS (NON-DISTINCT PART)                                       | 25.00                                    | 5,534                                                             | 0.000000                                                            | 0                                                  | 53.00 |  |
| 53.01                                                                                                        | OBSERVATION BEDS (DISTINCT PART)                                           | 25.01                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 53.01 |  |
| 54.00                                                                                                        | BEHAVIORAL HEALTH                                                          | 26.00                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 54.00 |  |
| 55.00                                                                                                        | TOTAL (sum of lines 49 through 52)                                         |                                          | 78,858                                                            |                                                                     | 0                                                  | 55.00 |  |
| Cost Center Description                                                                                      |                                                                            | Cost                                     |                                                                   | Charges                                                             |                                                    |       |  |
|                                                                                                              |                                                                            | Part A                                   | Part B                                                            | Part A                                                              | Part B                                             |       |  |
|                                                                                                              |                                                                            | 1.00                                     | 2.00                                                              | 3.00                                                                | 4.00                                               |       |  |
| PART III - SUMMARY OF COSTS AND CHARGES                                                                      |                                                                            |                                          |                                                                   |                                                                     |                                                    |       |  |
| 56.00                                                                                                        | Routine and Ancillary from Part I                                          | 470,043                                  |                                                                   | 2,206,803                                                           |                                                    | 56.00 |  |
| 57.00                                                                                                        | Interns and Residents (inpatient)                                          | 0                                        |                                                                   | 0                                                                   |                                                    | 57.00 |  |
| 58.00                                                                                                        | Interns and Residents (outpatient)                                         | 0                                        |                                                                   | 0                                                                   |                                                    | 58.00 |  |
| 59.00                                                                                                        | Direct Organ Acquisition (see instructions)                                | 2,497,891                                |                                                                   | 2,790,000                                                           |                                                    | 59.00 |  |
| 60.00                                                                                                        | Cost of physicians' services in a teaching hospital (see intructions)      | 0                                        |                                                                   | 0                                                                   |                                                    | 60.00 |  |
| 61.00                                                                                                        | Total (sum of lines 56 thru 60)                                            | 2,967,934                                |                                                                   | 4,996,803                                                           |                                                    | 61.00 |  |
| 62.00                                                                                                        | Total Usable Organs (see instructions)                                     |                                          | 50                                                                |                                                                     |                                                    | 62.00 |  |
| 63.00                                                                                                        | Medicare Usable Organs (see instructions)                                  |                                          | 26                                                                |                                                                     |                                                    | 63.00 |  |
| 64.00                                                                                                        | Ratio of Medicare Usable Organs to Total Usable Organs (line 63 ÷ line 62) |                                          | 0.520000                                                          |                                                                     |                                                    | 64.00 |  |
| 65.00                                                                                                        | Medicare Cost/Charges (see instructions)                                   | 1,543,326                                |                                                                   | 2,598,338                                                           |                                                    | 65.00 |  |
| 66.00                                                                                                        | Revenue for Organs Sold                                                    | 53,866                                   |                                                                   | 53,866                                                              |                                                    | 66.00 |  |
| 67.00                                                                                                        | Subtotal (line 65 minus line 66)                                           | 1,489,460                                |                                                                   | 2,544,472                                                           |                                                    | 67.00 |  |
| 68.00                                                                                                        | Organs Furnished Part B                                                    | 0                                        | 0                                                                 | 0                                                                   | 0                                                  | 68.00 |  |
| 69.00                                                                                                        | Net Organ Acquisition Cost and Charges (see instructions)                  | 1,489,460                                | 0                                                                 | 2,544,472                                                           | 0                                                  | 69.00 |  |
| Cost Center Description                                                                                      |                                                                            |                                          | Living Related                                                    | Cadaveric                                                           | Revenue                                            |       |  |
|                                                                                                              |                                                                            |                                          | 1.00                                                              | 2.00                                                                | 3.00                                               |       |  |
| PART IV - STATISTICS                                                                                         |                                                                            |                                          |                                                                   |                                                                     |                                                    |       |  |
| 70.00                                                                                                        | Organs Excised in Provider (1)                                             |                                          | 0                                                                 | 19                                                                  |                                                    | 70.00 |  |
| 71.00                                                                                                        | Organs Purchased from Other Transplant Hospitals (2)                       |                                          | 0                                                                 | 0                                                                   |                                                    | 71.00 |  |
| 72.00                                                                                                        | Organs Purchased from Non-Transplant Hospitals                             |                                          | 0                                                                 | 0                                                                   |                                                    | 72.00 |  |
| 73.00                                                                                                        | Organs Purchased from OPOs                                                 |                                          | 0                                                                 | 31                                                                  |                                                    | 73.00 |  |
| 74.00                                                                                                        | Total (sum of lines 70 through 73)                                         |                                          | 0                                                                 | 50                                                                  |                                                    | 74.00 |  |
| 75.00                                                                                                        | Organs Transplanted                                                        |                                          | 0                                                                 | 31                                                                  | 0                                                  | 75.00 |  |
| 76.00                                                                                                        | Organs Sold to Other Hospitals                                             |                                          | 0                                                                 | 0                                                                   | 0                                                  | 76.00 |  |
| 77.00                                                                                                        | Organs Sold to OPOs                                                        |                                          | 0                                                                 | 19                                                                  | 53,866                                             | 77.00 |  |
| 78.00                                                                                                        | Organs Sold to Transplant Hospitals                                        |                                          | 0                                                                 | 0                                                                   | 0                                                  | 78.00 |  |
| 79.00                                                                                                        | Organs Sold to Military or VA Hospitals                                    |                                          | 0                                                                 | 0                                                                   | 0                                                  | 79.00 |  |
| 80.00                                                                                                        | Organs Sold Outside the U.S.                                               |                                          | 0                                                                 | 0                                                                   | 0                                                  | 80.00 |  |
| 81.00                                                                                                        | Organs Sent Outside the U.S. (no revenue received)                         |                                          | 0                                                                 | 0                                                                   |                                                    | 81.00 |  |
| 82.00                                                                                                        | Organs Used for Research                                                   |                                          | 0                                                                 | 0                                                                   |                                                    | 82.00 |  |
| 83.00                                                                                                        | Unusable/Discarded Organs                                                  |                                          | 0                                                                 | 0                                                                   |                                                    | 83.00 |  |
| 84.00                                                                                                        | Total (sum of lines 75 through 83 should equal line 74)                    |                                          | 0                                                                 | 50                                                                  |                                                    | 84.00 |  |

(1) Organs procured outside your center by a procurement team from your center are not to be included in the count.

(2) Organs procured outside your center by a procurement team from your center are included in the count.

COMPUTATION OF ORGAN ACQUISITION COSTS AND CHARGES FOR HOSPITALS  
WHICH ARE CERTIFIED TRANSPLANT CENTERS

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet D-4

Component CCN:

Date/Time Prepared:  
11/24/2019 4:22 pm

|                                                                                            |                                      | Pancreas                      |                                       | Hospital                                       |                                              | PPS                                        |       |
|--------------------------------------------------------------------------------------------|--------------------------------------|-------------------------------|---------------------------------------|------------------------------------------------|----------------------------------------------|--------------------------------------------|-------|
| Cost Center Description                                                                    |                                      | Worksheet D-1<br>Line Numbers | Inpatient<br>Routine Organ<br>Charges | Per Diem Costs<br>(from Wkst.<br>D-1, Part II) | Organ<br>Acquisition                         | Cost (col. 2 x<br>col. 3)                  |       |
|                                                                                            |                                      | 0                             | 1.00                                  | 2.00                                           | 3.00                                         | 4.00                                       |       |
| PART I - COMPUTATION OF ORGAN ACQUISITION COSTS (INPATIENT ROUTINE AND ANCILLARY SERVICES) |                                      |                               |                                       |                                                |                                              |                                            |       |
| Computation of Inpatient Routine Service Costs Applicable to Organ Acquisition             |                                      |                               |                                       |                                                |                                              |                                            |       |
| 1.00                                                                                       | ADULTS & PEDIATRICS                  | 38.00                         | 0                                     | 1,304.71                                       | 0                                            | 0                                          | 1.00  |
| 2.00                                                                                       | INTENSIVE CARE UNIT                  | 43.00                         | 0                                     | 0.00                                           | 0                                            | 0                                          | 2.00  |
| 3.00                                                                                       | CORONARY CARE UNIT                   | 44.00                         | 0                                     | 0.00                                           | 0                                            | 0                                          | 3.00  |
| 4.00                                                                                       | BURN INTENSIVE CARE UNIT             | 45.00                         | 0                                     | 0.00                                           | 0                                            | 0                                          | 4.00  |
| 5.00                                                                                       | SURGICAL INTENSIVE CARE UNIT         | 46.00                         | 6,121                                 | 2,010.23                                       | 1                                            | 2,010                                      | 5.00  |
| 6.00                                                                                       | MEDICAL INTENSIVE CARE UNIT          | 47.00                         | 0                                     | 2,115.86                                       | 0                                            | 0                                          | 6.00  |
| 6.01                                                                                       | PEDIATRIC INTENSIVE CARE UNIT        | 47.01                         | 0                                     | 2,407.66                                       | 0                                            | 0                                          | 6.01  |
| 6.02                                                                                       | PREMATURE INTENSIVE CARE UNIT        | 47.02                         | 0                                     | 1,627.08                                       | 0                                            | 0                                          | 6.02  |
| 7.00                                                                                       | TOTAL (sum of lines 1 through 6)     |                               | 6,121                                 |                                                | 1                                            | 2,010                                      | 7.00  |
| Cost Center Description                                                                    |                                      |                               | Worksheet C<br>Line Numbers           | Ratio of<br>Cost/Charges<br>(from Wkst. C)     | Organ<br>Acquisition<br>Ancillary<br>Charges | Organ<br>Acquisition<br>Ancillary<br>Costs |       |
|                                                                                            |                                      |                               | 0                                     | 1.00                                           | 2.00                                         | 3.00                                       |       |
| Computation of Ancillary Service Cost Applicable to Organ Acquisition                      |                                      |                               |                                       |                                                |                                              |                                            |       |
| 8.00                                                                                       | OPERATING ROOM                       |                               | 50.00                                 | 0.158579                                       | 14,114                                       | 2,238                                      | 8.00  |
| 9.00                                                                                       | RECOVERY ROOM                        |                               | 51.00                                 | 0.337600                                       | 22,284                                       | 7,523                                      | 9.00  |
| 10.00                                                                                      | DELIVERY ROOM & LABOR ROOM           |                               | 52.00                                 | 0.456278                                       | 0                                            | 0                                          | 10.00 |
| 11.00                                                                                      | ANESTHESIOLOGY                       |                               | 53.00                                 | 0.121538                                       | 2,388                                        | 290                                        | 11.00 |
| 12.00                                                                                      | RADIOLOGY-DIAGNOSTIC                 |                               | 54.00                                 | 0.139555                                       | 64,351                                       | 8,981                                      | 12.00 |
| 13.00                                                                                      | RADIOLOGY-THERAPEUTIC                |                               | 55.00                                 | 0.152729                                       | 0                                            | 0                                          | 13.00 |
| 14.00                                                                                      | RADIOISOTOPE                         |                               | 56.00                                 | 0.213038                                       | 50,026                                       | 10,657                                     | 14.00 |
| 15.00                                                                                      | CT SCAN                              |                               | 57.00                                 | 0.000000                                       | 0                                            | 0                                          | 15.00 |
| 16.00                                                                                      | MAGNETIC RESONANCE IMAGING (MRI)     |                               | 58.00                                 | 0.000000                                       | 0                                            | 0                                          | 16.00 |
| 17.00                                                                                      | CARDIAC CATHETERIZATION              |                               | 59.00                                 | 0.000000                                       | 0                                            | 0                                          | 17.00 |
| 18.00                                                                                      | LABORATORY                           |                               | 60.00                                 | 0.191336                                       | 281,780                                      | 53,915                                     | 18.00 |
| 18.01                                                                                      | LABORATORY - HLA                     |                               | 60.01                                 | 0.427124                                       | 130,010                                      | 55,530                                     | 18.01 |
| 19.00                                                                                      | PBP CLINICAL LAB SERVICES-PRGM ONLY  |                               | 61.00                                 | 0.000000                                       | 0                                            | 0                                          | 19.00 |
| 20.00                                                                                      | WHOLE BLOOD & PACKED RED BLOOD CELLS |                               | 62.00                                 | 0.282719                                       | 5,732                                        | 1,621                                      | 20.00 |
| 21.00                                                                                      | BLOOD STORING, PROCESSING & TRANS.   |                               | 63.00                                 | 0.000000                                       | 0                                            | 0                                          | 21.00 |
| 22.00                                                                                      | INTRAVENOUS THERAPY                  |                               | 64.00                                 | 0.038832                                       | 1,179                                        | 46                                         | 22.00 |
| 23.00                                                                                      | RESPIRATORY THERAPY                  |                               | 65.00                                 | 0.316917                                       | 1,613                                        | 511                                        | 23.00 |
| 24.00                                                                                      | PHYSICAL THERAPY                     |                               | 66.00                                 | 0.278895                                       | 0                                            | 0                                          | 24.00 |
| 25.00                                                                                      | OCCUPATIONAL THERAPY                 |                               | 67.00                                 | 0.314565                                       | 0                                            | 0                                          | 25.00 |
| 26.00                                                                                      | SPEECH PATHOLOGY                     |                               | 68.00                                 | 0.374815                                       | 0                                            | 0                                          | 26.00 |
| 27.00                                                                                      | ELECTROCARDIOLOGY                    |                               | 69.00                                 | 0.125452                                       | 74,291                                       | 9,320                                      | 27.00 |
| 28.00                                                                                      | ELECTROENCEPHALOGRAPHY               |                               | 70.00                                 | 0.149488                                       | 0                                            | 0                                          | 28.00 |
| 29.00                                                                                      | MEDICAL SUPPLIES CHARGED TO PATIENTS |                               | 71.00                                 | 0.355115                                       | 7,353                                        | 2,611                                      | 29.00 |
| 30.00                                                                                      | IMPL. DEV. CHARGED TO PATIENTS       |                               | 72.00                                 | 0.357513                                       | 3,963                                        | 1,417                                      | 30.00 |
| 31.00                                                                                      | DRUGS CHARGED TO PATIENTS            |                               | 73.00                                 | 0.272594                                       | 21,939                                       | 5,980                                      | 31.00 |
| 32.00                                                                                      | RENAL DIALYSIS                       |                               | 74.00                                 | 0.000000                                       | 0                                            | 0                                          | 32.00 |
| 33.00                                                                                      | ASC (NON-DISTINCT PART)              |                               | 75.00                                 | 0.000000                                       | 0                                            | 0                                          | 33.00 |
| 34.00                                                                                      | RENAL DIALYSIS ADULT                 |                               | 76.00                                 | 0.306590                                       | 323                                          | 99                                         | 34.00 |
| 34.01                                                                                      | PSYCH DAY HOSPITAL                   |                               | 76.01                                 | 8.722772                                       | 0                                            | 0                                          | 34.01 |
| 35.00                                                                                      | RURAL HEALTH CLINIC                  |                               | 88.00                                 | 0.000000                                       | 0                                            | 0                                          | 35.00 |
| 36.00                                                                                      | FEDERALLY QUALIFIED HEALTH CENTER    |                               | 89.00                                 | 0.000000                                       | 0                                            | 0                                          | 36.00 |
| 37.00                                                                                      | CLINIC                               |                               | 90.00                                 | 0.386418                                       | 23,743                                       | 9,175                                      | 37.00 |
| 38.00                                                                                      | EMERGENCY                            |                               | 91.00                                 | 0.201332                                       | 0                                            | 0                                          | 38.00 |
| 39.00                                                                                      | OBSERVATION BEDS (NON-DISTINCT PART) |                               | 92.00                                 | 0.555909                                       | 4,301                                        | 2,391                                      | 39.00 |
| 39.01                                                                                      | OBSERVATION BEDS (DISTINCT PART)     |                               | 92.01                                 | 0.000000                                       | 0                                            | 0                                          | 39.01 |
| 40.00                                                                                      | BEHAVIORAL HEALTH                    |                               | 93.00                                 | 0.000000                                       | 0                                            | 0                                          | 40.00 |
| 41.00                                                                                      | TOTAL (sum of lines 8 through 40)    |                               |                                       |                                                | 709,390                                      | 172,305                                    | 41.00 |

(1) Organs procured outside your center by a procurement team from your center are not to be included in the count.

(2) Organs procured outside your center by a procurement team from your center are included in the count.

COMPUTATION OF ORGAN ACQUISITION COSTS AND CHARGES FOR HOSPITALS  
WHICH ARE CERTIFIED TRANSPLANT CENTERS

Provider CCN: 14-0119

Period:

Worksheet D-4

Component CCN:

From 07/01/2018  
To 06/30/2019Date/Time Prepared:  
11/24/2019 4:22 pm

|                                                                                                              |                                                                            | Pancreas                                 |                                                                   | Hospital                                                            |                                                    | PPS |       |
|--------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------|------------------------------------------|-------------------------------------------------------------------|---------------------------------------------------------------------|----------------------------------------------------|-----|-------|
| Cost Center Description                                                                                      |                                                                            | Worksheet D-2,<br>Part I Line<br>Numbers | Average Cost<br>Per Day (from<br>Wkst. D-2,<br>Part I, col.<br>4) | Organ<br>Acquisition                                                | Organ<br>Acquisition<br>Costs (col. 1<br>x col. 2) |     |       |
|                                                                                                              |                                                                            | 0                                        | 1.00                                                              | 2.00                                                                | 3.00                                               |     |       |
| PART II - COMPUTATION OF ORGAN ACQUISITION COSTS (OTHER THAN INPATIENT ROUTINE AND ANCILLARY SERVICES COSTS) |                                                                            |                                          |                                                                   |                                                                     |                                                    |     |       |
| Computation of the Cost of Inpatient Services of Interns and Residents Not In Approved Teaching Program      |                                                                            |                                          |                                                                   |                                                                     |                                                    |     |       |
| 42.00                                                                                                        | ADULTS & PEDIATRICS                                                        | 2.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 42.00 |
| 43.00                                                                                                        | INTENSIVE CARE UNIT                                                        | 3.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 43.00 |
| 44.00                                                                                                        | CORONARY CARE UNIT                                                         | 4.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 44.00 |
| 45.00                                                                                                        | BURN INTENSIVE CARE UNIT                                                   | 5.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 45.00 |
| 46.00                                                                                                        | SURGICAL INTENSIVE CARE UNIT                                               | 6.00                                     | 0.00                                                              | 1                                                                   | 0                                                  | 0   | 46.00 |
| 47.00                                                                                                        | MEDICAL INTENSIVE CARE UNIT                                                | 7.00                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 47.00 |
| 47.01                                                                                                        | PEDIATRIC INTENSIVE CARE UNIT                                              | 7.01                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 47.01 |
| 47.02                                                                                                        | PREMATURE INTENSIVE CARE UNIT                                              | 7.02                                     | 0.00                                                              | 0                                                                   | 0                                                  | 0   | 47.02 |
| 48.00                                                                                                        | TOTAL (sum of lines 42 through 47)                                         |                                          |                                                                   | 1                                                                   | 0                                                  | 0   | 48.00 |
| Cost Center Description                                                                                      |                                                                            | Worksheet D-2,<br>Part I Line<br>Numbers | Organ Charges<br>(see<br>instructions)                            | Ratio of Cost<br>To Charges<br>from Wkst.<br>D-2, Part I,<br>col. 4 | Organ<br>Acquisition<br>Costs (col. 1<br>x col. 2) |     |       |
|                                                                                                              |                                                                            | 0                                        | 1.00                                                              | 2.00                                                                | 3.00                                               |     |       |
| Computation of the Cost of Outpatient Services of Interns and Residents Not In Approved Teaching Program     |                                                                            |                                          |                                                                   |                                                                     |                                                    |     |       |
| 49.00                                                                                                        | RURAL HEALTH CLINIC                                                        | 21.00                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 0   | 49.00 |
| 50.00                                                                                                        | FEDERALLY QUALIFIED HEALTH CENTER                                          | 22.00                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 0   | 50.00 |
| 51.00                                                                                                        | CLINIC                                                                     | 23.00                                    | 23,743                                                            | 0.000000                                                            | 0                                                  | 0   | 51.00 |
| 52.00                                                                                                        | EMERGENCY                                                                  | 24.00                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 0   | 52.00 |
| 53.00                                                                                                        | OBSERVATION BEDS (NON-DISTINCT PART)                                       | 25.00                                    | 4,301                                                             | 0.000000                                                            | 0                                                  | 0   | 53.00 |
| 53.01                                                                                                        | OBSERVATION BEDS (DISTINCT PART)                                           | 25.01                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 0   | 53.01 |
| 54.00                                                                                                        | BEHAVIORAL HEALTH                                                          | 26.00                                    | 0                                                                 | 0.000000                                                            | 0                                                  | 0   | 54.00 |
| 55.00                                                                                                        | TOTAL (sum of lines 49 through 52)                                         |                                          | 28,044                                                            |                                                                     | 0                                                  | 0   | 55.00 |
| Cost Center Description                                                                                      |                                                                            | Cost                                     |                                                                   | Charges                                                             |                                                    |     |       |
|                                                                                                              |                                                                            | Part A                                   | Part B                                                            | Part A                                                              | Part B                                             |     |       |
|                                                                                                              |                                                                            | 1.00                                     | 2.00                                                              | 3.00                                                                | 4.00                                               |     |       |
| PART III - SUMMARY OF COSTS AND CHARGES                                                                      |                                                                            |                                          |                                                                   |                                                                     |                                                    |     |       |
| 56.00                                                                                                        | Routine and Ancillary from Part I                                          | 174,315                                  |                                                                   | 715,511                                                             |                                                    |     | 56.00 |
| 57.00                                                                                                        | Interns and Residents (inpatient)                                          | 0                                        |                                                                   | 0                                                                   |                                                    |     | 57.00 |
| 58.00                                                                                                        | Interns and Residents (outpatient)                                         | 0                                        |                                                                   | 0                                                                   |                                                    |     | 58.00 |
| 59.00                                                                                                        | Direct Organ Acquisition (see instructions)                                | 344,963                                  |                                                                   | 425,000                                                             |                                                    |     | 59.00 |
| 60.00                                                                                                        | Cost of physicians' services in a teaching hospital (see intructions)      | 0                                        |                                                                   | 0                                                                   |                                                    |     | 60.00 |
| 61.00                                                                                                        | Total (sum of lines 56 thru 60)                                            | 519,278                                  |                                                                   | 1,140,511                                                           |                                                    |     | 61.00 |
| 62.00                                                                                                        | Total Usable Organs (see instructions)                                     |                                          | 7                                                                 |                                                                     |                                                    |     | 62.00 |
| 63.00                                                                                                        | Medicare Usable Organs (see instructions)                                  |                                          | 5                                                                 |                                                                     |                                                    |     | 63.00 |
| 64.00                                                                                                        | Ratio of Medicare Usable Organs to Total Usable Organs (line 63 ÷ line 62) |                                          | 0.714286                                                          |                                                                     |                                                    |     | 64.00 |
| 65.00                                                                                                        | Medicare Cost/Charges (see instructions)                                   | 370,913                                  |                                                                   | 814,651                                                             |                                                    |     | 65.00 |
| 66.00                                                                                                        | Revenue for Organs Sold                                                    | 5,670                                    |                                                                   | 5,670                                                               |                                                    |     | 66.00 |
| 67.00                                                                                                        | Subtotal (line 65 minus line 66)                                           | 365,243                                  |                                                                   | 808,981                                                             |                                                    |     | 67.00 |
| 68.00                                                                                                        | Organs Furnished Part B                                                    | 0                                        | 0                                                                 | 0                                                                   |                                                    | 0   | 68.00 |
| 69.00                                                                                                        | Net Organ Acquisition Cost and Charges (see instructions)                  | 365,243                                  | 0                                                                 | 808,981                                                             |                                                    | 0   | 69.00 |
| Cost Center Description                                                                                      |                                                                            |                                          | Living Related                                                    | Cadaveric                                                           | Revenue                                            |     |       |
|                                                                                                              |                                                                            |                                          | 1.00                                                              | 2.00                                                                | 3.00                                               |     |       |
| PART IV - STATISTICS                                                                                         |                                                                            |                                          |                                                                   |                                                                     |                                                    |     |       |
| 70.00                                                                                                        | Organs Excised in Provider (1)                                             |                                          | 0                                                                 | 2                                                                   |                                                    |     | 70.00 |
| 71.00                                                                                                        | Organs Purchased from Other Transplant Hospitals (2)                       |                                          | 0                                                                 | 0                                                                   |                                                    |     | 71.00 |
| 72.00                                                                                                        | Organs Purchased from Non-Transplant Hospitals                             |                                          | 0                                                                 | 0                                                                   |                                                    |     | 72.00 |
| 73.00                                                                                                        | Organs Purchased from OPOs                                                 |                                          | 0                                                                 | 5                                                                   |                                                    |     | 73.00 |
| 74.00                                                                                                        | Total (sum of lines 70 through 73)                                         |                                          | 0                                                                 | 7                                                                   |                                                    |     | 74.00 |
| 75.00                                                                                                        | Organs Transplanted                                                        |                                          | 0                                                                 | 5                                                                   |                                                    | 0   | 75.00 |
| 76.00                                                                                                        | Organs Sold to Other Hospitals                                             |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 76.00 |
| 77.00                                                                                                        | Organs Sold to OPOs                                                        |                                          | 0                                                                 | 2                                                                   | 5,670                                              | 0   | 77.00 |
| 78.00                                                                                                        | Organs Sold to Transplant Hospitals                                        |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 78.00 |
| 79.00                                                                                                        | Organs Sold to Military or VA Hospitals                                    |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 79.00 |
| 80.00                                                                                                        | Organs Sold Outside the U.S.                                               |                                          | 0                                                                 | 0                                                                   |                                                    | 0   | 80.00 |
| 81.00                                                                                                        | Organs Sent Outside the U.S. (no revenue received)                         |                                          | 0                                                                 | 0                                                                   |                                                    |     | 81.00 |
| 82.00                                                                                                        | Organs Used for Research                                                   |                                          | 0                                                                 | 0                                                                   |                                                    |     | 82.00 |
| 83.00                                                                                                        | Unusable/Discarded Organs                                                  |                                          | 0                                                                 | 0                                                                   |                                                    |     | 83.00 |
| 84.00                                                                                                        | Total (sum of lines 75 through 83 should equal line 74)                    |                                          | 0                                                                 | 7                                                                   |                                                    |     | 84.00 |

(1) Organs procured outside your center by a procurement team from your center are not to be included in the count.  
 (2) Organs procured outside your center by a procurement team from your center are included in the count.

| CALCULATION OF REIMBURSEMENT SETTLEMENT                                          |                                                                                                                                                                                                                                         | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet E<br>Part A<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|----------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|--------------------------------------------------------------------|
|                                                                                  |                                                                                                                                                                                                                                         | Title XVIII           | Hospital                                    | PPS                                                                |
|                                                                                  |                                                                                                                                                                                                                                         | Before GEO<br>Reclass | On/After GEO<br>Reclass                     |                                                                    |
|                                                                                  |                                                                                                                                                                                                                                         | 1.00                  | 1.01                                        |                                                                    |
| <b>PART A - INPATIENT HOSPITAL SERVICES UNDER IPPS</b>                           |                                                                                                                                                                                                                                         |                       |                                             |                                                                    |
| 1.00                                                                             | DRG Amounts Other than Outlier Payments                                                                                                                                                                                                 | 0                     | 0                                           | 1.00                                                               |
| 1.01                                                                             | DRG amounts other than outlier payments for discharges occurring prior to October 1 (see instructions)                                                                                                                                  | 0                     | 30,366,079                                  | 1.01                                                               |
| 1.02                                                                             | DRG amounts other than outlier payments for discharges occurring on or after October 1 (see instructions)                                                                                                                               | 0                     | 91,098,237                                  | 1.02                                                               |
| 1.03                                                                             | DRG for federal specific operating payment for Model 4 BPCI for discharges occurring prior to October 1 (see instructions)                                                                                                              | 0                     | 0                                           | 1.03                                                               |
| 1.04                                                                             | DRG for federal specific operating payment for Model 4 BPCI for discharges occurring on or after October 1 (see instructions)                                                                                                           | 0                     | 0                                           | 1.04                                                               |
| 2.00                                                                             | Outlier payments for discharges. (see instructions)                                                                                                                                                                                     | 0                     | 5,206,302                                   | 2.00                                                               |
| 2.01                                                                             | Outlier reconciliation amount                                                                                                                                                                                                           | 0                     | 0                                           | 2.01                                                               |
| 2.02                                                                             | Outlier payment for discharges for Model 4 BPCI (see instructions)                                                                                                                                                                      | 0                     | 0                                           | 2.02                                                               |
| 3.00                                                                             | Managed Care Simulated Payments                                                                                                                                                                                                         | 0                     | 24,064,298                                  | 3.00                                                               |
| 4.00                                                                             | Bed days available divided by number of days in the cost reporting period (see instructions)                                                                                                                                            | 565.20                |                                             | 4.00                                                               |
| <b>Indirect Medical Education Adjustment</b>                                     |                                                                                                                                                                                                                                         |                       |                                             |                                                                    |
| 5.00                                                                             | FTE count for allopathic and osteopathic programs for the most recent cost reporting period ending on or before 12/31/1996.(see instructions)                                                                                           | 509.59                |                                             | 5.00                                                               |
| 6.00                                                                             | FTE count for allopathic and osteopathic programs that meet the criteria for an add-on to the cap for new programs in accordance with 42 CFR 413.79(e)                                                                                  | 0.00                  |                                             | 6.00                                                               |
| 7.00                                                                             | MMA Section 422 reduction amount to the IME cap as specified under 42 CFR §412.105(f)(1)(iv)(B)(1)                                                                                                                                      | 17.61                 |                                             | 7.00                                                               |
| 7.01                                                                             | ACA § 5503 reduction amount to the IME cap as specified under 42 CFR §412.105(f)(1)(iv)(B)(2) If the cost report straddles July 1, 2011 then see instructions.                                                                          | 0.00                  |                                             | 7.01                                                               |
| 8.00                                                                             | Adjustment (increase or decrease) to the FTE count for allopathic and osteopathic programs for affiliated programs in accordance with 42 CFR 413.75(b), 413.79(c)(2)(iv), 64 FR 26340 (May 12, 1998), and 67 FR 50069 (August 1, 2002). | 85.00                 |                                             | 8.00                                                               |
| 8.01                                                                             | The amount of increase if the hospital was awarded FTE cap slots under § 5503 of the ACA. If the cost report straddles July 1, 2011, see instructions.                                                                                  | 0.00                  |                                             | 8.01                                                               |
| 8.02                                                                             | The amount of increase if the hospital was awarded FTE cap slots from a closed teaching hospital under § 5506 of ACA. (see instructions)                                                                                                | 0.00                  |                                             | 8.02                                                               |
| 9.00                                                                             | Sum of lines 5 plus 6 minus lines (7 and 7.01) plus/minus lines (8, 8.01 and 8.02) (see instructions)                                                                                                                                   | 576.98                |                                             | 9.00                                                               |
| 10.00                                                                            | FTE count for allopathic and osteopathic programs in the current year from your records                                                                                                                                                 | 553.92                |                                             | 10.00                                                              |
| 11.00                                                                            | FTE count for residents in dental and podiatric programs.                                                                                                                                                                               | 2.45                  |                                             | 11.00                                                              |
| 12.00                                                                            | Current year allowable FTE (see instructions)                                                                                                                                                                                           | 556.37                |                                             | 12.00                                                              |
| 13.00                                                                            | Total allowable FTE count for the prior year.                                                                                                                                                                                           | 537.78                |                                             | 13.00                                                              |
| 14.00                                                                            | Total allowable FTE count for the penultimate year if that year ended on or after September 30, 1997, otherwise enter zero.                                                                                                             | 459.38                |                                             | 14.00                                                              |
| 15.00                                                                            | Sum of lines 12 through 14 divided by 3.                                                                                                                                                                                                | 517.84                |                                             | 15.00                                                              |
| 16.00                                                                            | Adjustment for residents in initial years of the program                                                                                                                                                                                | 0.99                  |                                             | 16.00                                                              |
| 17.00                                                                            | Adjustment for residents displaced by program or hospital closure                                                                                                                                                                       | 0.00                  |                                             | 17.00                                                              |
| 18.00                                                                            | Adjusted rolling average FTE count                                                                                                                                                                                                      | 518.83                |                                             | 18.00                                                              |
| 19.00                                                                            | Current year resident to bed ratio (line 18 divided by line 4).                                                                                                                                                                         | 0.917958              |                                             | 19.00                                                              |
| 20.00                                                                            | Prior year resident to bed ratio (see instructions)                                                                                                                                                                                     | 0.968638              |                                             | 20.00                                                              |
| 21.00                                                                            | Enter the lesser of lines 19 or 20 (see instructions)                                                                                                                                                                                   | 0.917958              |                                             | 21.00                                                              |
| 22.00                                                                            | IME payment adjustment (see instructions)                                                                                                                                                                                               | 0                     | 49,491,000                                  | 22.00                                                              |
| 22.01                                                                            | IME payment adjustment - Managed Care (see instructions)                                                                                                                                                                                | 0                     | 9,805,070                                   | 22.01                                                              |
| <b>Indirect Medical Education Adjustment for the Add-on for § 422 of the MMA</b> |                                                                                                                                                                                                                                         |                       |                                             |                                                                    |
| 23.00                                                                            | Number of additional allopathic and osteopathic IME FTE resident cap slots under 42 CFR 412.105 (f)(1)(iv)(C ).                                                                                                                         | 0.00                  |                                             | 23.00                                                              |
| 24.00                                                                            | IME FTE Resident Count Over Cap (see instructions)                                                                                                                                                                                      | -23.06                |                                             | 24.00                                                              |
| 25.00                                                                            | If the amount on line 24 is greater than -0-, then enter the lower of line 23 or line 24 (see instructions)                                                                                                                             | 0.00                  |                                             | 25.00                                                              |
| 26.00                                                                            | Resident to bed ratio (divide line 25 by line 4)                                                                                                                                                                                        | 0.000000              |                                             | 26.00                                                              |
| 27.00                                                                            | IME payments adjustment factor. (see instructions)                                                                                                                                                                                      | 0.000000              |                                             | 27.00                                                              |
| 28.00                                                                            | IME add-on adjustment amount (see instructions)                                                                                                                                                                                         | 0                     | 0                                           | 28.00                                                              |
| 28.01                                                                            | IME add-on adjustment amount - Managed Care (see instructions)                                                                                                                                                                          | 0                     | 0                                           | 28.01                                                              |
| 29.00                                                                            | Total IME payment ( sum of lines 22 and 28)                                                                                                                                                                                             | 0                     | 49,491,000                                  | 29.00                                                              |
| 29.01                                                                            | Total IME payment - Managed Care (sum of lines 22.01 and 28.01)                                                                                                                                                                         | 0                     | 9,805,070                                   | 29.01                                                              |
| <b>Disproportionate Share Adjustment</b>                                         |                                                                                                                                                                                                                                         |                       |                                             |                                                                    |
| 30.00                                                                            | Percentage of SSI recipient patient days to Medicare Part A patient days (see instructions)                                                                                                                                             | 8.10                  |                                             | 30.00                                                              |
| 31.00                                                                            | Percentage of Medicaid patient days (see instructions)                                                                                                                                                                                  | 31.54                 |                                             | 31.00                                                              |
| 32.00                                                                            | Sum of lines 30 and 31                                                                                                                                                                                                                  | 39.64                 |                                             | 32.00                                                              |
| 33.00                                                                            | Allowable disproportionate share percentage (see instructions)                                                                                                                                                                          | 21.92                 | 21.92                                       | 33.00                                                              |
| 34.00                                                                            | Disproportionate share adjustment (see instructions)                                                                                                                                                                                    | 0                     | 6,656,245                                   | 34.00                                                              |

| CALCULATION OF REIMBURSEMENT SETTLEMENT                                                     |                                                                                                                                   | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet E<br>Part A<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |       |
|---------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|--------------------------------------------------------------------|-------|
|                                                                                             |                                                                                                                                   | Title XVIII           | Hospital                                    | PPS                                                                |       |
|                                                                                             |                                                                                                                                   |                       | Prior to 10/1                               | On/After 10/1                                                      |       |
|                                                                                             |                                                                                                                                   |                       | 1.00                                        | 2.00                                                               |       |
|                                                                                             | Uncompensated Care Adjustment                                                                                                     |                       |                                             |                                                                    |       |
| 35.00                                                                                       | Total uncompensated care amount (see instructions)                                                                                |                       | 0                                           | 0                                                                  | 35.00 |
| 35.01                                                                                       | Factor 3 (see instructions)                                                                                                       | 0.000000000           | 0.000000000                                 |                                                                    | 35.01 |
| 35.02                                                                                       | Hospital uncompensated care payment (If line 34 is zero, enter zero on this line) (see instructions)                              | 8,494,845             | 8,765,504                                   |                                                                    | 35.02 |
| 35.03                                                                                       | Pro rata share of the hospital uncompensated care payment amount (see instructions)                                               | 2,141,168             | 6,556,115                                   |                                                                    | 35.03 |
| 36.00                                                                                       | Total uncompensated care (sum of columns 1 and 2 on line 35.03)                                                                   | 8,697,283             |                                             |                                                                    | 36.00 |
| Additional payment for high percentage of ESRD beneficiary discharges (lines 40 through 46) |                                                                                                                                   |                       |                                             |                                                                    |       |
| 40.00                                                                                       | Total Medicare discharges on Worksheet S-3, Part I excluding discharges for MS-DRGs 652, 682, 683, 684 and 685 (see instructions) | 8,748                 |                                             |                                                                    | 40.00 |
|                                                                                             |                                                                                                                                   |                       | Before GEO<br>Reclass                       | On/After GEO<br>Reclass                                            |       |
|                                                                                             |                                                                                                                                   |                       | 1.00                                        | 1.01                                                               |       |
| 41.00                                                                                       | Total ESRD Medicare discharges excluding MS-DRGs 652, 682, 683, 684 and 685. (see instructions)                                   | 0                     |                                             | 923                                                                | 41.00 |
| 41.01                                                                                       | Total ESRD Medicare covered and paid discharges excluding MS-DRGs 652, 682, 683, 684 and 685. (see instructions)                  | 0                     |                                             | 923                                                                | 41.01 |
| 42.00                                                                                       | Divide line 41 by line 40 (if less than 10%, you do not qualify for adjustment)                                                   | 10.55                 |                                             |                                                                    | 42.00 |
| 43.00                                                                                       | Total Medicare ESRD inpatient days excluding MS-DRGs 652, 682, 683, 684 and 685. (see instructions)                               | 7,312                 |                                             |                                                                    | 43.00 |
| 44.00                                                                                       | Ratio of average length of stay to one week (line 43 divided by line 41 divided by 7 days)                                        | 1.131713              |                                             |                                                                    | 44.00 |
| 45.00                                                                                       | Average weekly cost for dialysis treatments (see instructions)                                                                    | 447.81                |                                             | 447.81                                                             | 45.00 |
| 46.00                                                                                       | Total additional payment (line 45 times line 44 times line 41.01)                                                                 | 467,767               |                                             |                                                                    | 46.00 |
| 47.00                                                                                       | Subtotal (see instructions)                                                                                                       | 2,608,935             |                                             | 189,373,978                                                        | 47.00 |
| 48.00                                                                                       | Hospital specific payments (to be completed by SCH and MDH, small rural hospitals only. (see instructions)                        | 0                     |                                             | 0                                                                  | 48.00 |
|                                                                                             |                                                                                                                                   |                       |                                             | Amount                                                             |       |
|                                                                                             |                                                                                                                                   |                       |                                             | 1.00                                                               |       |
| 49.00                                                                                       | Total payment for inpatient operating costs (see instructions)                                                                    |                       |                                             | 201,787,983                                                        | 49.00 |
| 50.00                                                                                       | Payment for inpatient program capital (from Wkst. L, Pt. I and Pt. II, as applicable)                                             |                       |                                             | 14,103,333                                                         | 50.00 |
| 51.00                                                                                       | Exception payment for inpatient program capital (Wkst. L, Pt. III, see instructions)                                              |                       |                                             | 0                                                                  | 51.00 |
| 52.00                                                                                       | Direct graduate medical education payment (from Wkst. E-4, line 49 see instructions).                                             |                       |                                             | 9,979,412                                                          | 52.00 |
| 53.00                                                                                       | Nursing and Allied Health Managed Care payment                                                                                    |                       |                                             | 327,796                                                            | 53.00 |
| 54.00                                                                                       | Special add-on payments for new technologies                                                                                      |                       |                                             | 2,005                                                              | 54.00 |
| 54.01                                                                                       | Islet isolation add-on payment                                                                                                    |                       |                                             | 0                                                                  | 54.01 |
| 55.00                                                                                       | Net organ acquisition cost (Wkst. D-4 Pt. III, col. 1, line 69)                                                                   |                       |                                             | 11,261,728                                                         | 55.00 |
| 56.00                                                                                       | Cost of physicians' services in a teaching hospital (see instructions)                                                            |                       |                                             | 0                                                                  | 56.00 |
| 57.00                                                                                       | Routine service other pass through costs (from Wkst. D, Pt. III, column 9, lines 30 through 35).                                  |                       |                                             | 2,284,168                                                          | 57.00 |
| 58.00                                                                                       | Ancillary service other pass through costs from Wkst. D, Pt. IV, col. 11 line 200)                                                |                       |                                             | 723,597                                                            | 58.00 |
| 59.00                                                                                       | Total (sum of amounts on lines 49 through 58)                                                                                     |                       |                                             | 240,470,022                                                        | 59.00 |
| 60.00                                                                                       | Primary payer payments                                                                                                            |                       |                                             | 75,913                                                             | 60.00 |
| 61.00                                                                                       | Total amount payable for program beneficiaries (line 59 minus line 60)                                                            |                       |                                             | 240,394,109                                                        | 61.00 |
| 62.00                                                                                       | Deductibles billed to program beneficiaries                                                                                       |                       |                                             | 8,368,762                                                          | 62.00 |
| 63.00                                                                                       | Coinurance billed to program beneficiaries                                                                                        |                       |                                             | 742,386                                                            | 63.00 |
| 64.00                                                                                       | Allowable bad debts (see instructions)                                                                                            |                       |                                             | 2,654,536                                                          | 64.00 |
| 65.00                                                                                       | Adjusted reimbursable bad debts (see instructions)                                                                                |                       |                                             | 1,725,448                                                          | 65.00 |
| 66.00                                                                                       | Allowable bad debts for dual eligible beneficiaries (see instructions)                                                            |                       |                                             | 1,549,643                                                          | 66.00 |
| 67.00                                                                                       | Subtotal (line 61 plus line 65 minus lines 62 and 63)                                                                             |                       |                                             | 233,008,409                                                        | 67.00 |
| 68.00                                                                                       | Credits received from manufacturers for replaced devices for applicable to MS-DRGs (see instructions)                             |                       |                                             | 0                                                                  | 68.00 |
| 69.00                                                                                       | Outlier payments reconciliation (sum of lines 93, 95 and 96). (For SCH see instructions)                                          |                       |                                             | 0                                                                  | 69.00 |
| 70.00                                                                                       | OTHER ADJUSTMENTS (SEE INSTRUCTIONS) (SPECIFY)                                                                                    |                       |                                             | 0                                                                  | 70.00 |
| 70.50                                                                                       | Rural Community Hospital Demonstration Project (\$410A Demonstration) adjustment (see instructions)                               |                       |                                             | 0                                                                  | 70.50 |
| 70.87                                                                                       | Demonstration payment adjustment amount before sequestration                                                                      |                       |                                             | 0                                                                  | 70.87 |
| 70.88                                                                                       | SCH or MDH volume decrease adjustment (contractor use only)                                                                       |                       |                                             | 0                                                                  | 70.88 |
| 70.89                                                                                       | Pioneer ACO demonstration payment adjustment amount (see instructions)                                                            |                       |                                             | 0                                                                  | 70.89 |
| 70.90                                                                                       | HSP bonus payment HVBP adjustment amount (see instructions)                                                                       |                       |                                             | 0                                                                  | 70.90 |
| 70.91                                                                                       | HSP bonus payment HRR adjustment amount (see instructions)                                                                        |                       |                                             | 0                                                                  | 70.91 |
| 70.92                                                                                       | Bundled Model 1 discount amount (see instructions)                                                                                |                       |                                             | 0                                                                  | 70.92 |
| 70.93                                                                                       | HVBP payment adjustment amount (see instructions)                                                                                 |                       |                                             | 203,833                                                            | 70.93 |
| 70.94                                                                                       | HRR adjustment amount (see instructions)                                                                                          |                       |                                             | -563,895                                                           | 70.94 |
| 70.95                                                                                       | Recovery of accelerated depreciation                                                                                              |                       |                                             | 0                                                                  | 70.95 |

## CALCULATION OF REIMBURSEMENT SETTLEMENT

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet E  
Part A  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                                                                                                                      |                                                                                                                                                | Title XVIII | Hospital      | PPS           |        |
|----------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------|-------------|---------------|---------------|--------|
|                                                                                                                      |                                                                                                                                                | FFY (yyyy)  |               | Amount        |        |
|                                                                                                                      |                                                                                                                                                | 0           |               | 1.00          |        |
| 70.96                                                                                                                | Low volume adjustment for federal fiscal year (yyyy) (Enter in column 0 the corresponding federal year for the period prior to 10/1)           | 0           |               | 0             | 70.96  |
| 70.97                                                                                                                | Low volume adjustment for federal fiscal year (yyyy) (Enter in column 0 the corresponding federal year for the period ending on or after 10/1) | 0           |               | 0             | 70.97  |
| 70.98                                                                                                                | Low Volume Payment-3                                                                                                                           |             |               | 0             | 70.98  |
| 70.99                                                                                                                | HAC adjustment amount (see instructions)                                                                                                       |             |               | 0             | 70.99  |
| 71.00                                                                                                                | Amount due provider (line 67 minus lines 68 plus/minus lines 69 & 70)                                                                          |             |               | 232,648,347   | 71.00  |
| 71.01                                                                                                                | Sequestration adjustment (see instructions)                                                                                                    |             |               | 4,652,967     | 71.01  |
| 71.02                                                                                                                | Demonstration payment adjustment amount after sequestration                                                                                    |             |               | 0             | 71.02  |
| 72.00                                                                                                                | Interim payments                                                                                                                               |             |               | 219,998,622   | 72.00  |
| 73.00                                                                                                                | Tentative settlement (for contractor use only)                                                                                                 |             |               | 0             | 73.00  |
| 74.00                                                                                                                | Balance due provider/program (line 71 minus lines 71.01, 71.02, 72, and 73)                                                                    |             |               | 7,996,758     | 74.00  |
| 75.00                                                                                                                | Protested amounts (nonallowable cost report items) in accordance with CMS Pub. 15-2, chapter 1, §115.2                                         |             |               | 22,239,477    | 75.00  |
| TO BE COMPLETED BY CONTRACTOR (lines 90 through 96)                                                                  |                                                                                                                                                |             |               |               |        |
| 90.00                                                                                                                | Operating outlier amount from Wkst. E, Pt. A, line 2, or sum of 2.03 plus 2.04 (see instructions)                                              |             |               | 0             | 90.00  |
| 91.00                                                                                                                | Capital outlier from Wkst. L, Pt. I, line 2                                                                                                    |             |               | 0             | 91.00  |
| 92.00                                                                                                                | Operating outlier reconciliation adjustment amount (see instructions)                                                                          |             |               | 0             | 92.00  |
| 93.00                                                                                                                | Capital outlier reconciliation adjustment amount (see instructions)                                                                            |             |               | 0             | 93.00  |
| 94.00                                                                                                                | The rate used to calculate the time value of money (see instructions)                                                                          |             |               | 0.00          | 94.00  |
| 95.00                                                                                                                | Time value of money for operating expenses (see instructions)                                                                                  |             |               | 0             | 95.00  |
| 96.00                                                                                                                | Time value of money for capital related expenses (see instructions)                                                                            |             |               | 0             | 96.00  |
|                                                                                                                      |                                                                                                                                                |             | Prior to 10/1 | On/After 10/1 |        |
|                                                                                                                      |                                                                                                                                                |             | 1.00          | 2.00          |        |
| HSP Bonus Payment Amount                                                                                             |                                                                                                                                                |             |               |               |        |
| 100.00                                                                                                               | HSP bonus amount (see instructions)                                                                                                            |             | 0             | 0             | 100.00 |
| HVBP Adjustment for HSP Bonus Payment                                                                                |                                                                                                                                                |             |               |               |        |
| 101.00                                                                                                               | HVBP adjustment factor (see instructions)                                                                                                      |             | 0.0000000000  | 0.0000000000  | 101.00 |
| 102.00                                                                                                               | HVBP adjustment amount for HSP bonus payment (see instructions)                                                                                |             | 0             | 0             | 102.00 |
| HRR Adjustment for HSP Bonus Payment                                                                                 |                                                                                                                                                |             |               |               |        |
| 103.00                                                                                                               | HRR adjustment factor (see instructions)                                                                                                       |             | 0.0000        | 0.0000        | 103.00 |
| 104.00                                                                                                               | HRR adjustment amount for HSP bonus payment (see instructions)                                                                                 |             | 0             | 0             | 104.00 |
| Rural Community Hospital Demonstration Project (§410A Demonstration) Adjustment                                      |                                                                                                                                                |             |               |               |        |
| 200.00                                                                                                               | Is this the first year of the current 5-year demonstration period under the 21st Century Cures Act? Enter "Y" for yes or "N" for no.           |             |               |               | 200.00 |
| Cost Reimbursement                                                                                                   |                                                                                                                                                |             |               |               |        |
| 201.00                                                                                                               | Medicare inpatient service costs (from Wkst. D-1, Pt. II, line 49)                                                                             |             |               |               | 201.00 |
| 202.00                                                                                                               | Medicare discharges (see instructions)                                                                                                         |             |               |               | 202.00 |
| 203.00                                                                                                               | Case-mix adjustment factor (see instructions)                                                                                                  |             |               |               | 203.00 |
| Computation of Demonstration Target Amount Limitation (N/A in first year of the current 5-year demonstration period) |                                                                                                                                                |             |               |               |        |
| 204.00                                                                                                               | Medicare target amount                                                                                                                         |             |               |               | 204.00 |
| 205.00                                                                                                               | Case-mix adjusted target amount (line 203 times line 204)                                                                                      |             |               |               | 205.00 |
| 206.00                                                                                                               | Medicare inpatient routine cost cap (line 202 times line 205)                                                                                  |             |               |               | 206.00 |
| Adjustment to Medicare Part A Inpatient Reimbursement                                                                |                                                                                                                                                |             |               |               |        |
| 207.00                                                                                                               | Program reimbursement under the §410A Demonstration (see instructions)                                                                         |             |               |               | 207.00 |
| 208.00                                                                                                               | Medicare Part A inpatient service costs (from Wkst. E, Pt. A, line 59)                                                                         |             |               |               | 208.00 |
| 209.00                                                                                                               | Adjustment to Medicare IPPS payments (see instructions)                                                                                        |             |               |               | 209.00 |
| 210.00                                                                                                               | Reserved for future use                                                                                                                        |             |               |               | 210.00 |
| 211.00                                                                                                               | Total adjustment to Medicare IPPS payments (see instructions)                                                                                  |             |               |               | 211.00 |
| Comparison of PPS versus Cost Reimbursement                                                                          |                                                                                                                                                |             |               |               |        |
| 212.00                                                                                                               | Total adjustment to Medicare Part A IPPS payments (from line 211)                                                                              |             |               |               | 212.00 |
| 213.00                                                                                                               | Low-volume adjustment (see instructions)                                                                                                       |             |               |               | 213.00 |
| 218.00                                                                                                               | Net Medicare Part A IPPS adjustment (difference between PPS and cost reimbursement) (line 212 minus line 213) (see instructions)               |             |               |               | 218.00 |

| CALCULATION OF REIMBURSEMENT SETTLEMENT                           |                                                                                                                                                                      | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet E<br>Part B<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|-------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|--------------------------------------------------------------------|
|                                                                   |                                                                                                                                                                      | Title XVIII           | Hospital                                    | PPS                                                                |
|                                                                   |                                                                                                                                                                      |                       |                                             | 1.00                                                               |
| PART B - MEDICAL AND OTHER HEALTH SERVICES                        |                                                                                                                                                                      |                       |                                             |                                                                    |
| 1.00                                                              | Medical and other services (see instructions)                                                                                                                        |                       | 323,619                                     | 1.00                                                               |
| 2.00                                                              | Medical and other services reimbursed under OPPS (see instructions)                                                                                                  |                       | 127,907,202                                 | 2.00                                                               |
| 3.00                                                              | OPPS payments                                                                                                                                                        |                       | 109,001,249                                 | 3.00                                                               |
| 4.00                                                              | Outlier payment (see instructions)                                                                                                                                   |                       | 713,647                                     | 4.00                                                               |
| 4.01                                                              | Outlier reconciliation amount (see instructions)                                                                                                                     |                       | 0                                           | 4.01                                                               |
| 5.00                                                              | Enter the hospital specific payment to cost ratio (see instructions)                                                                                                 |                       | 0.818                                       | 5.00                                                               |
| 6.00                                                              | Line 2 times line 5                                                                                                                                                  |                       | 104,628,091                                 | 6.00                                                               |
| 7.00                                                              | Sum of lines 3, 4, and 4.01, divided by line 6                                                                                                                       |                       | 0.00                                        | 7.00                                                               |
| 8.00                                                              | Transitional corridor payment (see instructions)                                                                                                                     |                       | 0                                           | 8.00                                                               |
| 9.00                                                              | Ancillary service other pass through costs from Wkst. D, Pt. IV, col. 13, line 200                                                                                   |                       | 773,272                                     | 9.00                                                               |
| 10.00                                                             | Organ acquisitions                                                                                                                                                   |                       | 0                                           | 10.00                                                              |
| 11.00                                                             | Total cost (sum of lines 1 and 10) (see instructions)                                                                                                                |                       | 323,619                                     | 11.00                                                              |
| COMPUTATION OF LESSER OF COST OR CHARGES                          |                                                                                                                                                                      |                       |                                             |                                                                    |
| Reasonable charges                                                |                                                                                                                                                                      |                       |                                             |                                                                    |
| 12.00                                                             | Ancillary service charges                                                                                                                                            |                       | 1,017,884                                   | 12.00                                                              |
| 13.00                                                             | Organ acquisition charges (from Wkst. D-4, Pt. III, col. 4, line 69)                                                                                                 |                       | 0                                           | 13.00                                                              |
| 14.00                                                             | Total reasonable charges (sum of lines 12 and 13)                                                                                                                    |                       | 1,017,884                                   | 14.00                                                              |
| Customary charges                                                 |                                                                                                                                                                      |                       |                                             |                                                                    |
| 15.00                                                             | Aggregate amount actually collected from patients liable for payment for services on a charge basis                                                                  |                       | 0                                           | 15.00                                                              |
| 16.00                                                             | Amounts that would have been realized from patients liable for payment for services on a chargebasis had such payment been made in accordance with 42 CFR §413.13(e) |                       | 0                                           | 16.00                                                              |
| 17.00                                                             | Ratio of line 15 to line 16 (not to exceed 1.000000)                                                                                                                 |                       | 0.000000                                    | 17.00                                                              |
| 18.00                                                             | Total customary charges (see instructions)                                                                                                                           |                       | 1,017,884                                   | 18.00                                                              |
| 19.00                                                             | Excess of customary charges over reasonable cost (complete only if line 18 exceeds line 11) (see instructions)                                                       |                       | 694,265                                     | 19.00                                                              |
| 20.00                                                             | Excess of reasonable cost over customary charges (complete only if line 11 exceeds line 18) (see instructions)                                                       |                       | 0                                           | 20.00                                                              |
| 21.00                                                             | Lesser of cost or charges (see instructions)                                                                                                                         |                       | 323,619                                     | 21.00                                                              |
| 22.00                                                             | Interns and residents (see instructions)                                                                                                                             |                       | 0                                           | 22.00                                                              |
| 23.00                                                             | Cost of physicians' services in a teaching hospital (see instructions)                                                                                               |                       | 0                                           | 23.00                                                              |
| 24.00                                                             | Total prospective payment (sum of lines 3, 4, 4.01, 8 and 9)                                                                                                         |                       | 110,488,168                                 | 24.00                                                              |
| COMPUTATION OF REIMBURSEMENT SETTLEMENT                           |                                                                                                                                                                      |                       |                                             |                                                                    |
| 25.00                                                             | Deductibles and coinsurance amounts (for CAH, see instructions)                                                                                                      |                       | 108,691                                     | 25.00                                                              |
| 26.00                                                             | Deductibles and Coinsurance amounts relating to amount on line 24 (for CAH, see instructions)                                                                        |                       | 17,993,074                                  | 26.00                                                              |
| 27.00                                                             | Subtotal [(lines 21 and 24 minus the sum of lines 25 and 26) plus the sum of lines 22 and 23] (see instructions)                                                     |                       | 92,710,022                                  | 27.00                                                              |
| 28.00                                                             | Direct graduate medical education payments (from Wkst. E-4, line 50)                                                                                                 |                       | 6,129,170                                   | 28.00                                                              |
| 29.00                                                             | ESRD direct medical education costs (from Wkst. E-4, line 36)                                                                                                        |                       | 0                                           | 29.00                                                              |
| 30.00                                                             | Subtotal (sum of lines 27 through 29)                                                                                                                                |                       | 98,839,192                                  | 30.00                                                              |
| 31.00                                                             | Primary payer payments                                                                                                                                               |                       | 5,097                                       | 31.00                                                              |
| 32.00                                                             | Subtotal (line 30 minus line 31)                                                                                                                                     |                       | 98,834,095                                  | 32.00                                                              |
| ALLOWABLE BAD DEBTS (EXCLUDE BAD DEBTS FOR PROFESSIONAL SERVICES) |                                                                                                                                                                      |                       |                                             |                                                                    |
| 33.00                                                             | Composite rate ESRD (from Wkst. I-5, line 11)                                                                                                                        |                       | 0                                           | 33.00                                                              |
| 34.00                                                             | Allowable bad debts (see instructions)                                                                                                                               |                       | 3,144,670                                   | 34.00                                                              |
| 35.00                                                             | Adjusted reimbursable bad debts (see instructions)                                                                                                                   |                       | 2,044,036                                   | 35.00                                                              |
| 36.00                                                             | Allowable bad debts for dual eligible beneficiaries (see instructions)                                                                                               |                       | 1,471,901                                   | 36.00                                                              |
| 37.00                                                             | Subtotal (see instructions)                                                                                                                                          |                       | 100,878,131                                 | 37.00                                                              |
| 38.00                                                             | MSP-LCC reconciliation amount from PS&R                                                                                                                              |                       | 0                                           | 38.00                                                              |
| 39.00                                                             | OTHER ADJUSTMENTS (SEE INSTRUCTIONS) (SPECIFY)                                                                                                                       |                       | 0                                           | 39.00                                                              |
| 39.50                                                             | Pioneer ACO demonstration payment adjustment (see instructions)                                                                                                      |                       | 0                                           | 39.50                                                              |
| 39.97                                                             | Demonstration payment adjustment amount before sequestration                                                                                                         |                       | 0                                           | 39.97                                                              |
| 39.98                                                             | Partial or full credits received from manufacturers for replaced devices (see instructions)                                                                          |                       | 0                                           | 39.98                                                              |
| 39.99                                                             | RECOVERY OF ACCELERATED DEPRECIATION                                                                                                                                 |                       | 0                                           | 39.99                                                              |
| 40.00                                                             | Subtotal (see instructions)                                                                                                                                          |                       | 100,878,131                                 | 40.00                                                              |
| 40.01                                                             | Sequestration adjustment (see instructions)                                                                                                                          |                       | 2,017,563                                   | 40.01                                                              |
| 40.02                                                             | Demonstration payment adjustment amount after sequestration                                                                                                          |                       | 0                                           | 40.02                                                              |
| 41.00                                                             | Interim payments                                                                                                                                                     |                       | 97,910,567                                  | 41.00                                                              |
| 42.00                                                             | Tentative settlement (for contractors use only)                                                                                                                      |                       | 0                                           | 42.00                                                              |
| 43.00                                                             | Balance due provider/program (see instructions)                                                                                                                      |                       | 950,001                                     | 43.00                                                              |
| 44.00                                                             | Protested amounts (nonallowable cost report items) in accordance with CMS Pub. 15-2, chapter 1, §115.2                                                               |                       | 9,201,638                                   | 44.00                                                              |
| TO BE COMPLETED BY CONTRACTOR                                     |                                                                                                                                                                      |                       |                                             |                                                                    |
| 90.00                                                             | Original outlier amount (see instructions)                                                                                                                           |                       | 0                                           | 90.00                                                              |
| 91.00                                                             | Outlier reconciliation adjustment amount (see instructions)                                                                                                          |                       | 0                                           | 91.00                                                              |
| 92.00                                                             | The rate used to calculate the Time Value of Money                                                                                                                   |                       | 0.00                                        | 92.00                                                              |
| 93.00                                                             | Time Value of Money (see instructions)                                                                                                                               |                       | 0                                           | 93.00                                                              |
| 94.00                                                             | Total (sum of lines 91 and 93)                                                                                                                                       |                       | 0                                           | 94.00                                                              |

| CALCULATION OF REIMBURSEMENT SETTLEMENT                                  |                                                                                                                                                                       | Provider CCN: 14-0119<br>Component CCN: 14-S119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet E<br>Part B<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|--------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|--------------------------------------------------------------------|
|                                                                          |                                                                                                                                                                       | Title XVIII                                     | Subprovider -<br>IPF                        | PPS                                                                |
|                                                                          |                                                                                                                                                                       | 1.00                                            |                                             |                                                                    |
| <b>PART B - MEDICAL AND OTHER HEALTH SERVICES</b>                        |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 1.00                                                                     | Medical and other services (see instructions)                                                                                                                         |                                                 | 0                                           | 1.00                                                               |
| 2.00                                                                     | Medical and other services reimbursed under OPPS (see instructions)                                                                                                   |                                                 | 0                                           | 2.00                                                               |
| 3.00                                                                     | OPPS payments                                                                                                                                                         |                                                 | 0                                           | 3.00                                                               |
| 4.00                                                                     | Outlier payment (see instructions)                                                                                                                                    |                                                 | 0                                           | 4.00                                                               |
| 4.01                                                                     | Outlier reconciliation amount (see instructions)                                                                                                                      |                                                 | 0                                           | 4.01                                                               |
| 5.00                                                                     | Enter the hospital specific payment to cost ratio (see instructions)                                                                                                  |                                                 | 0.000                                       | 5.00                                                               |
| 6.00                                                                     | Line 2 times line 5                                                                                                                                                   |                                                 | 0                                           | 6.00                                                               |
| 7.00                                                                     | Sum of lines 3, 4, and 4.01, divided by line 6                                                                                                                        |                                                 | 0.00                                        | 7.00                                                               |
| 8.00                                                                     | Transitional corridor payment (see instructions)                                                                                                                      |                                                 | 0                                           | 8.00                                                               |
| 9.00                                                                     | Ancillary service other pass through costs from Wkst. D, Pt. IV, col. 13, line 200                                                                                    |                                                 | 0                                           | 9.00                                                               |
| 10.00                                                                    | Organ acquisitions                                                                                                                                                    |                                                 | 0                                           | 10.00                                                              |
| 11.00                                                                    | Total cost (sum of lines 1 and 10) (see instructions)                                                                                                                 |                                                 | 0                                           | 11.00                                                              |
| <b>COMPUTATION OF LESSER OF COST OR CHARGES</b>                          |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| <b>Reasonable charges</b>                                                |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 12.00                                                                    | Ancillary service charges                                                                                                                                             |                                                 | 0                                           | 12.00                                                              |
| 13.00                                                                    | Organ acquisition charges (from Wkst. D-4, Pt. III, col. 4, line 69)                                                                                                  |                                                 | 0                                           | 13.00                                                              |
| 14.00                                                                    | Total reasonable charges (sum of lines 12 and 13)                                                                                                                     |                                                 | 0                                           | 14.00                                                              |
| <b>Customary charges</b>                                                 |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 15.00                                                                    | Aggregate amount actually collected from patients liable for payment for services on a charge basis                                                                   |                                                 | 0                                           | 15.00                                                              |
| 16.00                                                                    | Amounts that would have been realized from patients liable for payment for services on a charge basis had such payment been made in accordance with 42 CFR §413.13(e) |                                                 | 0                                           | 16.00                                                              |
| 17.00                                                                    | Ratio of line 15 to line 16 (not to exceed 1.000000)                                                                                                                  |                                                 | 0.000000                                    | 17.00                                                              |
| 18.00                                                                    | Total customary charges (see instructions)                                                                                                                            |                                                 | 0                                           | 18.00                                                              |
| 19.00                                                                    | Excess of customary charges over reasonable cost (complete only if line 18 exceeds line 11) (see instructions)                                                        |                                                 | 0                                           | 19.00                                                              |
| 20.00                                                                    | Excess of reasonable cost over customary charges (complete only if line 11 exceeds line 18) (see instructions)                                                        |                                                 | 0                                           | 20.00                                                              |
| 21.00                                                                    | Lesser of cost or charges (see instructions)                                                                                                                          |                                                 | 0                                           | 21.00                                                              |
| 22.00                                                                    | Interns and residents (see instructions)                                                                                                                              |                                                 | 0                                           | 22.00                                                              |
| 23.00                                                                    | Cost of physicians' services in a teaching hospital (see instructions)                                                                                                |                                                 | 0                                           | 23.00                                                              |
| 24.00                                                                    | Total prospective payment (sum of lines 3, 4, 4.01, 8 and 9)                                                                                                          |                                                 | 0                                           | 24.00                                                              |
| <b>COMPUTATION OF REIMBURSEMENT SETTLEMENT</b>                           |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 25.00                                                                    | Deductibles and coinsurance amounts (for CAH, see instructions)                                                                                                       |                                                 | 0                                           | 25.00                                                              |
| 26.00                                                                    | Deductibles and Coinsurance amounts relating to amount on line 24 (for CAH, see instructions)                                                                         |                                                 | 0                                           | 26.00                                                              |
| 27.00                                                                    | Subtotal [(lines 21 and 24 minus the sum of lines 25 and 26) plus the sum of lines 22 and 23] (see instructions)                                                      |                                                 | 0                                           | 27.00                                                              |
| 28.00                                                                    | Direct graduate medical education payments (from Wkst. E-4, line 50)                                                                                                  |                                                 | 0                                           | 28.00                                                              |
| 29.00                                                                    | ESRD direct medical education costs (from Wkst. E-4, line 36)                                                                                                         |                                                 | 0                                           | 29.00                                                              |
| 30.00                                                                    | Subtotal (sum of lines 27 through 29)                                                                                                                                 |                                                 | 0                                           | 30.00                                                              |
| 31.00                                                                    | Primary payer payments                                                                                                                                                |                                                 | 0                                           | 31.00                                                              |
| 32.00                                                                    | Subtotal (line 30 minus line 31)                                                                                                                                      |                                                 | 0                                           | 32.00                                                              |
| <b>ALLOWABLE BAD DEBTS (EXCLUDE BAD DEBTS FOR PROFESSIONAL SERVICES)</b> |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 33.00                                                                    | Composite rate ESRD (from Wkst. I-5, line 11)                                                                                                                         |                                                 | 0                                           | 33.00                                                              |
| 34.00                                                                    | Allowable bad debts (see instructions)                                                                                                                                |                                                 | 0                                           | 34.00                                                              |
| 35.00                                                                    | Adjusted reimbursable bad debts (see instructions)                                                                                                                    |                                                 | 0                                           | 35.00                                                              |
| 36.00                                                                    | Allowable bad debts for dual eligible beneficiaries (see instructions)                                                                                                |                                                 | 0                                           | 36.00                                                              |
| 37.00                                                                    | Subtotal (see instructions)                                                                                                                                           |                                                 | 0                                           | 37.00                                                              |
| 38.00                                                                    | MSP-LCC reconciliation amount from PS&R                                                                                                                               |                                                 | 0                                           | 38.00                                                              |
| 39.00                                                                    | OTHER ADJUSTMENTS (SEE INSTRUCTIONS) (SPECIFY)                                                                                                                        |                                                 | 0                                           | 39.00                                                              |
| 39.50                                                                    | Pioneer ACO demonstration payment adjustment (see instructions)                                                                                                       |                                                 | 39.50                                       |                                                                    |
| 39.97                                                                    | Demonstration payment adjustment amount before sequestration                                                                                                          |                                                 | 0                                           | 39.97                                                              |
| 39.98                                                                    | Partial or full credits received from manufacturers for replaced devices (see instructions)                                                                           |                                                 | 0                                           | 39.98                                                              |
| 39.99                                                                    | RECOVERY OF ACCELERATED DEPRECIATION                                                                                                                                  |                                                 | 0                                           | 39.99                                                              |
| 40.00                                                                    | Subtotal (see instructions)                                                                                                                                           |                                                 | 0                                           | 40.00                                                              |
| 40.01                                                                    | Sequestration adjustment (see instructions)                                                                                                                           |                                                 | 0                                           | 40.01                                                              |
| 40.02                                                                    | Demonstration payment adjustment amount after sequestration                                                                                                           |                                                 | 0                                           | 40.02                                                              |
| 41.00                                                                    | Interim payments                                                                                                                                                      |                                                 | 0                                           | 41.00                                                              |
| 42.00                                                                    | Tentative settlement (for contractors use only)                                                                                                                       |                                                 | 0                                           | 42.00                                                              |
| 43.00                                                                    | Balance due provider/program (see instructions)                                                                                                                       |                                                 | 0                                           | 43.00                                                              |
| 44.00                                                                    | Protested amounts (nonallowable cost report items) in accordance with CMS Pub. 15-2, chapter 1, §115.2                                                                |                                                 | 0                                           | 44.00                                                              |
| <b>TO BE COMPLETED BY CONTRACTOR</b>                                     |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 90.00                                                                    | Original outlier amount (see instructions)                                                                                                                            |                                                 | 0                                           | 90.00                                                              |
| 91.00                                                                    | Outlier reconciliation adjustment amount (see instructions)                                                                                                           |                                                 | 0                                           | 91.00                                                              |
| 92.00                                                                    | The rate used to calculate the Time Value of Money                                                                                                                    |                                                 | 0.00                                        | 92.00                                                              |
| 93.00                                                                    | Time Value of Money (see instructions)                                                                                                                                |                                                 | 0                                           | 93.00                                                              |
| 94.00                                                                    | Total (sum of lines 91 and 93)                                                                                                                                        |                                                 | 0                                           | 94.00                                                              |

| CALCULATION OF REIMBURSEMENT SETTLEMENT                                  |                                                                                                                                                                       | Provider CCN: 14-0119<br>Component CCN: 14-T119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet E<br>Part B<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
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|                                                                          |                                                                                                                                                                       | Title XVIII                                     | Subprovider -<br>IRF                        | PPS                                                                |
|                                                                          |                                                                                                                                                                       | 1.00                                            |                                             |                                                                    |
| <b>PART B - MEDICAL AND OTHER HEALTH SERVICES</b>                        |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 1.00                                                                     | Medical and other services (see instructions)                                                                                                                         |                                                 | 0                                           | 1.00                                                               |
| 2.00                                                                     | Medical and other services reimbursed under OPPS (see instructions)                                                                                                   |                                                 | 0                                           | 2.00                                                               |
| 3.00                                                                     | OPPS payments                                                                                                                                                         |                                                 | 0                                           | 3.00                                                               |
| 4.00                                                                     | Outlier payment (see instructions)                                                                                                                                    |                                                 | 0                                           | 4.00                                                               |
| 4.01                                                                     | Outlier reconciliation amount (see instructions)                                                                                                                      |                                                 | 0                                           | 4.01                                                               |
| 5.00                                                                     | Enter the hospital specific payment to cost ratio (see instructions)                                                                                                  |                                                 | 0.000                                       | 5.00                                                               |
| 6.00                                                                     | Line 2 times line 5                                                                                                                                                   |                                                 | 0                                           | 6.00                                                               |
| 7.00                                                                     | Sum of lines 3, 4, and 4.01, divided by line 6                                                                                                                        |                                                 | 0.00                                        | 7.00                                                               |
| 8.00                                                                     | Transitional corridor payment (see instructions)                                                                                                                      |                                                 | 0                                           | 8.00                                                               |
| 9.00                                                                     | Ancillary service other pass through costs from Wkst. D, Pt. IV, col. 13, line 200                                                                                    |                                                 | 0                                           | 9.00                                                               |
| 10.00                                                                    | Organ acquisitions                                                                                                                                                    |                                                 | 0                                           | 10.00                                                              |
| 11.00                                                                    | Total cost (sum of lines 1 and 10) (see instructions)                                                                                                                 |                                                 | 0                                           | 11.00                                                              |
| <b>COMPUTATION OF LESSER OF COST OR CHARGES</b>                          |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| <b>Reasonable charges</b>                                                |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 12.00                                                                    | Ancillary service charges                                                                                                                                             |                                                 | 0                                           | 12.00                                                              |
| 13.00                                                                    | Organ acquisition charges (from Wkst. D-4, Pt. III, col. 4, line 69)                                                                                                  |                                                 | 0                                           | 13.00                                                              |
| 14.00                                                                    | Total reasonable charges (sum of lines 12 and 13)                                                                                                                     |                                                 | 0                                           | 14.00                                                              |
| <b>Customary charges</b>                                                 |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 15.00                                                                    | Aggregate amount actually collected from patients liable for payment for services on a charge basis                                                                   |                                                 | 0                                           | 15.00                                                              |
| 16.00                                                                    | Amounts that would have been realized from patients liable for payment for services on a charge basis had such payment been made in accordance with 42 CFR §413.13(e) |                                                 | 0                                           | 16.00                                                              |
| 17.00                                                                    | Ratio of line 15 to line 16 (not to exceed 1.000000)                                                                                                                  |                                                 | 0.000000                                    | 17.00                                                              |
| 18.00                                                                    | Total customary charges (see instructions)                                                                                                                            |                                                 | 0                                           | 18.00                                                              |
| 19.00                                                                    | Excess of customary charges over reasonable cost (complete only if line 18 exceeds line 11) (see instructions)                                                        |                                                 | 0                                           | 19.00                                                              |
| 20.00                                                                    | Excess of reasonable cost over customary charges (complete only if line 11 exceeds line 18) (see instructions)                                                        |                                                 | 0                                           | 20.00                                                              |
| 21.00                                                                    | Lesser of cost or charges (see instructions)                                                                                                                          |                                                 | 0                                           | 21.00                                                              |
| 22.00                                                                    | Interns and residents (see instructions)                                                                                                                              |                                                 | 0                                           | 22.00                                                              |
| 23.00                                                                    | Cost of physicians' services in a teaching hospital (see instructions)                                                                                                |                                                 | 0                                           | 23.00                                                              |
| 24.00                                                                    | Total prospective payment (sum of lines 3, 4, 4.01, 8 and 9)                                                                                                          |                                                 | 0                                           | 24.00                                                              |
| <b>COMPUTATION OF REIMBURSEMENT SETTLEMENT</b>                           |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 25.00                                                                    | Deductibles and coinsurance amounts (for CAH, see instructions)                                                                                                       |                                                 | 0                                           | 25.00                                                              |
| 26.00                                                                    | Deductibles and Coinsurance amounts relating to amount on line 24 (for CAH, see instructions)                                                                         |                                                 | 0                                           | 26.00                                                              |
| 27.00                                                                    | Subtotal [(lines 21 and 24 minus the sum of lines 25 and 26) plus the sum of lines 22 and 23] (see instructions)                                                      |                                                 | 0                                           | 27.00                                                              |
| 28.00                                                                    | Direct graduate medical education payments (from Wkst. E-4, line 50)                                                                                                  |                                                 | 0                                           | 28.00                                                              |
| 29.00                                                                    | ESRD direct medical education costs (from Wkst. E-4, line 36)                                                                                                         |                                                 | 0                                           | 29.00                                                              |
| 30.00                                                                    | Subtotal (sum of lines 27 through 29)                                                                                                                                 |                                                 | 0                                           | 30.00                                                              |
| 31.00                                                                    | Primary payer payments                                                                                                                                                |                                                 | 0                                           | 31.00                                                              |
| 32.00                                                                    | Subtotal (line 30 minus line 31)                                                                                                                                      |                                                 | 0                                           | 32.00                                                              |
| <b>ALLOWABLE BAD DEBTS (EXCLUDE BAD DEBTS FOR PROFESSIONAL SERVICES)</b> |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 33.00                                                                    | Composite rate ESRD (from Wkst. I-5, line 11)                                                                                                                         |                                                 | 0                                           | 33.00                                                              |
| 34.00                                                                    | Allowable bad debts (see instructions)                                                                                                                                |                                                 | 0                                           | 34.00                                                              |
| 35.00                                                                    | Adjusted reimbursable bad debts (see instructions)                                                                                                                    |                                                 | 0                                           | 35.00                                                              |
| 36.00                                                                    | Allowable bad debts for dual eligible beneficiaries (see instructions)                                                                                                |                                                 | 0                                           | 36.00                                                              |
| 37.00                                                                    | Subtotal (see instructions)                                                                                                                                           |                                                 | 0                                           | 37.00                                                              |
| 38.00                                                                    | MSP-LCC reconciliation amount from PS&R                                                                                                                               |                                                 | 0                                           | 38.00                                                              |
| 39.00                                                                    | OTHER ADJUSTMENTS (SEE INSTRUCTIONS) (SPECIFY)                                                                                                                        |                                                 | 0                                           | 39.00                                                              |
| 39.50                                                                    | Pioneer ACO demonstration payment adjustment (see instructions)                                                                                                       |                                                 | 39.50                                       |                                                                    |
| 39.97                                                                    | Demonstration payment adjustment amount before sequestration                                                                                                          |                                                 | 0                                           | 39.97                                                              |
| 39.98                                                                    | Partial or full credits received from manufacturers for replaced devices (see instructions)                                                                           |                                                 | 0                                           | 39.98                                                              |
| 39.99                                                                    | RECOVERY OF ACCELERATED DEPRECIATION                                                                                                                                  |                                                 | 0                                           | 39.99                                                              |
| 40.00                                                                    | Subtotal (see instructions)                                                                                                                                           |                                                 | 0                                           | 40.00                                                              |
| 40.01                                                                    | Sequestration adjustment (see instructions)                                                                                                                           |                                                 | 0                                           | 40.01                                                              |
| 40.02                                                                    | Demonstration payment adjustment amount after sequestration                                                                                                           |                                                 | 0                                           | 40.02                                                              |
| 41.00                                                                    | Interim payments                                                                                                                                                      |                                                 | 0                                           | 41.00                                                              |
| 42.00                                                                    | Tentative settlement (for contractors use only)                                                                                                                       |                                                 | 0                                           | 42.00                                                              |
| 43.00                                                                    | Balance due provider/program (see instructions)                                                                                                                       |                                                 | 0                                           | 43.00                                                              |
| 44.00                                                                    | Protested amounts (nonallowable cost report items) in accordance with CMS Pub. 15-2, chapter 1, §115.2                                                                |                                                 | 0                                           | 44.00                                                              |
| <b>TO BE COMPLETED BY CONTRACTOR</b>                                     |                                                                                                                                                                       |                                                 |                                             |                                                                    |
| 90.00                                                                    | Original outlier amount (see instructions)                                                                                                                            |                                                 | 0                                           | 90.00                                                              |
| 91.00                                                                    | Outlier reconciliation adjustment amount (see instructions)                                                                                                           |                                                 | 0                                           | 91.00                                                              |
| 92.00                                                                    | The rate used to calculate the Time Value of Money                                                                                                                    |                                                 | 0.00                                        | 92.00                                                              |
| 93.00                                                                    | Time Value of Money (see instructions)                                                                                                                                |                                                 | 0                                           | 93.00                                                              |
| 94.00                                                                    | Total (sum of lines 91 and 93)                                                                                                                                        |                                                 | 0                                           | 94.00                                                              |

## ANALYSIS OF PAYMENTS TO PROVIDERS FOR SERVICES RENDERED

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet E-1  
Part I  
Date/Time Prepared:  
11/24/2019 4:22 pm

|                               |                                                                                                                                                                                                                        | Title XVIII      |             | Hospital          |                      | PPS  |  |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-------------|-------------------|----------------------|------|--|
|                               |                                                                                                                                                                                                                        | Inpatient Part A |             | Part B            |                      |      |  |
|                               |                                                                                                                                                                                                                        | mm/dd/yyyy       | Amount      | mm/dd/yyyy        | Amount               |      |  |
|                               |                                                                                                                                                                                                                        | 1.00             | 2.00        | 3.00              | 4.00                 |      |  |
| 1.00                          | Total interim payments paid to provider                                                                                                                                                                                |                  | 221,294,329 |                   | 99,548,946           | 1.00 |  |
| 2.00                          | Interim payments payable on individual bills, either submitted or to be submitted to the contractor for services rendered in the cost reporting period. If none, write "NONE" or enter a zero                          |                  | 0           |                   | 0                    | 2.00 |  |
| 3.00                          | List separately each retroactive lump sum adjustment amount based on subsequent revision of the interim rate for the cost reporting period. Also show date of each payment. If none, write "NONE" or enter a zero. (1) |                  |             |                   |                      | 3.00 |  |
| Program to Provider           |                                                                                                                                                                                                                        |                  |             |                   |                      |      |  |
| 3.01                          | ADJUSTMENTS TO PROVIDER                                                                                                                                                                                                |                  | 0           |                   | 0                    | 3.01 |  |
| 3.02                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 3.02 |  |
| 3.03                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 3.03 |  |
| 3.04                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 3.04 |  |
| 3.05                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 3.05 |  |
| Provider to Program           |                                                                                                                                                                                                                        |                  |             |                   |                      |      |  |
| 3.50                          | ADJUSTMENTS TO PROGRAM                                                                                                                                                                                                 | 06/12/2019       | 1,295,707   | 06/12/2019        | 1,638,379            | 3.50 |  |
| 3.51                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 3.51 |  |
| 3.52                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 3.52 |  |
| 3.53                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 3.53 |  |
| 3.54                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 3.54 |  |
| 3.99                          | Subtotal (sum of lines 3.01-3.49 minus sum of lines 3.50-3.98)                                                                                                                                                         |                  | -1,295,707  |                   | -1,638,379           | 3.99 |  |
| 4.00                          | Total interim payments (sum of lines 1, 2, and 3.99) (transfer to Wkst. E or Wkst. E-3, line and column as appropriate)                                                                                                |                  | 219,998,622 |                   | 97,910,567           | 4.00 |  |
| TO BE COMPLETED BY CONTRACTOR |                                                                                                                                                                                                                        |                  |             |                   |                      |      |  |
| 5.00                          | List separately each tentative settlement payment after desk review. Also show date of each payment. If none, write "NONE" or enter a zero. (1)                                                                        |                  |             |                   |                      | 5.00 |  |
| Program to Provider           |                                                                                                                                                                                                                        |                  |             |                   |                      |      |  |
| 5.01                          | TENTATIVE TO PROVIDER                                                                                                                                                                                                  |                  | 0           |                   | 0                    | 5.01 |  |
| 5.02                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 5.02 |  |
| 5.03                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 5.03 |  |
| Provider to Program           |                                                                                                                                                                                                                        |                  |             |                   |                      |      |  |
| 5.50                          | TENTATIVE TO PROGRAM                                                                                                                                                                                                   |                  | 0           |                   | 0                    | 5.50 |  |
| 5.51                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 5.51 |  |
| 5.52                          |                                                                                                                                                                                                                        |                  | 0           |                   | 0                    | 5.52 |  |
| 5.99                          | Subtotal (sum of lines 5.01-5.49 minus sum of lines 5.50-5.98)                                                                                                                                                         |                  | 0           |                   | 0                    | 5.99 |  |
| 6.00                          | Determined net settlement amount (balance due) based on the cost report. (1)                                                                                                                                           |                  |             |                   |                      | 6.00 |  |
| 6.01                          | SETTLEMENT TO PROVIDER                                                                                                                                                                                                 |                  | 7,996,758   |                   | 950,001              | 6.01 |  |
| 6.02                          | SETTLEMENT TO PROGRAM                                                                                                                                                                                                  |                  | 0           |                   | 0                    | 6.02 |  |
| 7.00                          | Total Medicare program liability (see instructions)                                                                                                                                                                    |                  | 227,995,380 |                   | 98,860,568           | 7.00 |  |
|                               |                                                                                                                                                                                                                        |                  |             | Contractor Number | NPR Date (Mo/Day/Yr) |      |  |
|                               |                                                                                                                                                                                                                        | 0                |             | 1.00              | 2.00                 |      |  |
| 8.00                          | Name of Contractor                                                                                                                                                                                                     |                  |             |                   |                      | 8.00 |  |

## ANALYSIS OF PAYMENTS TO PROVIDERS FOR SERVICES RENDERED

 Provider CCN: 14-0119  
 Component CCN: 14-S119

 Period:  
 From 07/01/2018  
 To 06/30/2019

 Worksheet E-1  
 Part I  
 Date/Time Prepared:  
 11/24/2019 4:22 pm

|                               |                                                                                                                                                                                                                        | Title XVIII      |           | Subprovider -<br>IPF |                         | PPS |      |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------|----------------------|-------------------------|-----|------|
|                               |                                                                                                                                                                                                                        | Inpatient Part A |           | Part B               |                         |     |      |
|                               |                                                                                                                                                                                                                        | mm/dd/yyyy       | Amount    | mm/dd/yyyy           | Amount                  |     |      |
|                               |                                                                                                                                                                                                                        | 1.00             | 2.00      | 3.00                 | 4.00                    |     |      |
| 1.00                          | Total interim payments paid to provider                                                                                                                                                                                |                  |           |                      |                         | 0   | 1.00 |
| 2.00                          | Interim payments payable on individual bills, either submitted or to be submitted to the contractor for services rendered in the cost reporting period. If none, write "NONE" or enter a zero                          |                  | 1,530,042 |                      |                         | 0   | 2.00 |
| 3.00                          | List separately each retroactive lump sum adjustment amount based on subsequent revision of the interim rate for the cost reporting period. Also show date of each payment. If none, write "NONE" or enter a zero. (1) |                  |           |                      |                         |     | 3.00 |
| Program to Provider           |                                                                                                                                                                                                                        |                  |           |                      |                         |     |      |
| 3.01                          | ADJUSTMENTS TO PROVIDER                                                                                                                                                                                                | 06/12/2019       | 16,839    |                      |                         | 0   | 3.01 |
| 3.02                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 3.02 |
| 3.03                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 3.03 |
| 3.04                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 3.04 |
| 3.05                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 3.05 |
| Provider to Program           |                                                                                                                                                                                                                        |                  |           |                      |                         |     |      |
| 3.50                          | ADJUSTMENTS TO PROGRAM                                                                                                                                                                                                 |                  | 0         |                      |                         | 0   | 3.50 |
| 3.51                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 3.51 |
| 3.52                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 3.52 |
| 3.53                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 3.53 |
| 3.54                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 3.54 |
| 3.99                          | Subtotal (sum of lines 3.01-3.49 minus sum of lines 3.50-3.98)                                                                                                                                                         |                  | 16,839    |                      |                         | 0   | 3.99 |
| 4.00                          | Total interim payments (sum of lines 1, 2, and 3.99) (transfer to Wkst. E or Wkst. E-3, line and column as appropriate)                                                                                                |                  | 1,546,881 |                      |                         | 0   | 4.00 |
| TO BE COMPLETED BY CONTRACTOR |                                                                                                                                                                                                                        |                  |           |                      |                         |     |      |
| 5.00                          | List separately each tentative settlement payment after desk review. Also show date of each payment. If none, write "NONE" or enter a zero. (1)                                                                        |                  |           |                      |                         |     | 5.00 |
| Program to Provider           |                                                                                                                                                                                                                        |                  |           |                      |                         |     |      |
| 5.01                          | TENTATIVE TO PROVIDER                                                                                                                                                                                                  |                  | 0         |                      |                         | 0   | 5.01 |
| 5.02                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 5.02 |
| 5.03                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 5.03 |
| Provider to Program           |                                                                                                                                                                                                                        |                  |           |                      |                         |     |      |
| 5.50                          | TENTATIVE TO PROGRAM                                                                                                                                                                                                   |                  | 0         |                      |                         | 0   | 5.50 |
| 5.51                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 5.51 |
| 5.52                          |                                                                                                                                                                                                                        |                  | 0         |                      |                         | 0   | 5.52 |
| 5.99                          | Subtotal (sum of lines 5.01-5.49 minus sum of lines 5.50-5.98)                                                                                                                                                         |                  | 0         |                      |                         | 0   | 5.99 |
| 6.00                          | Determined net settlement amount (balance due) based on the cost report. (1)                                                                                                                                           |                  |           |                      |                         |     | 6.00 |
| 6.01                          | SETTLEMENT TO PROVIDER                                                                                                                                                                                                 |                  | 235,343   |                      |                         | 0   | 6.01 |
| 6.02                          | SETTLEMENT TO PROGRAM                                                                                                                                                                                                  |                  | 0         |                      |                         | 0   | 6.02 |
| 7.00                          | Total Medicare program liability (see instructions)                                                                                                                                                                    |                  | 1,782,224 |                      |                         | 0   | 7.00 |
|                               |                                                                                                                                                                                                                        |                  |           | Contractor<br>Number | NPR Date<br>(Mo/Day/Yr) |     |      |
|                               |                                                                                                                                                                                                                        | 0                |           | 1.00                 | 2.00                    |     |      |
| 8.00                          | Name of Contractor                                                                                                                                                                                                     |                  |           |                      |                         |     |      |

## ANALYSIS OF PAYMENTS TO PROVIDERS FOR SERVICES RENDERED

 Provider CCN: 14-0119  
 Component CCN: 14-T119

 Period:  
 From 07/01/2018  
 To 06/30/2019

 Worksheet E-1  
 Part I  
 Date/Time Prepared:  
 11/24/2019 4:22 pm

|                               |                                                                                                                                                                                                                        | Title XVIII      |           | Subprovider - IRF |                      | PPS  |  |
|-------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|-----------|-------------------|----------------------|------|--|
|                               |                                                                                                                                                                                                                        | Inpatient Part A |           | Part B            |                      |      |  |
|                               |                                                                                                                                                                                                                        | mm/dd/yyyy       | Amount    | mm/dd/yyyy        | Amount               |      |  |
|                               |                                                                                                                                                                                                                        | 1.00             | 2.00      | 3.00              | 4.00                 |      |  |
| 1.00                          | Total interim payments paid to provider                                                                                                                                                                                |                  | 7,457,022 |                   | 0                    | 1.00 |  |
| 2.00                          | Interim payments payable on individual bills, either submitted or to be submitted to the contractor for services rendered in the cost reporting period. If none, write "NONE" or enter a zero                          |                  | 0         |                   | 0                    | 2.00 |  |
| 3.00                          | List separately each retroactive lump sum adjustment amount based on subsequent revision of the interim rate for the cost reporting period. Also show date of each payment. If none, write "NONE" or enter a zero. (1) |                  |           |                   |                      | 3.00 |  |
| Program to Provider           |                                                                                                                                                                                                                        |                  |           |                   |                      |      |  |
| 3.01                          | ADJUSTMENTS TO PROVIDER                                                                                                                                                                                                |                  | 0         |                   | 0                    | 3.01 |  |
| 3.02                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 3.02 |  |
| 3.03                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 3.03 |  |
| 3.04                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 3.04 |  |
| 3.05                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 3.05 |  |
| Provider to Program           |                                                                                                                                                                                                                        |                  |           |                   |                      |      |  |
| 3.50                          | ADJUSTMENTS TO PROGRAM                                                                                                                                                                                                 | 06/12/2019       | 173,604   |                   | 0                    | 3.50 |  |
| 3.51                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 3.51 |  |
| 3.52                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 3.52 |  |
| 3.53                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 3.53 |  |
| 3.54                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 3.54 |  |
| 3.99                          | Subtotal (sum of lines 3.01-3.49 minus sum of lines 3.50-3.98)                                                                                                                                                         |                  | -173,604  |                   | 0                    | 3.99 |  |
| 4.00                          | Total interim payments (sum of lines 1, 2, and 3.99) (transfer to Wkst. E or Wkst. E-3, line and column as appropriate)                                                                                                |                  | 7,283,418 |                   | 0                    | 4.00 |  |
| TO BE COMPLETED BY CONTRACTOR |                                                                                                                                                                                                                        |                  |           |                   |                      |      |  |
| 5.00                          | List separately each tentative settlement payment after desk review. Also show date of each payment. If none, write "NONE" or enter a zero. (1)                                                                        |                  |           |                   |                      | 5.00 |  |
| Program to Provider           |                                                                                                                                                                                                                        |                  |           |                   |                      |      |  |
| 5.01                          | TENTATIVE TO PROVIDER                                                                                                                                                                                                  |                  | 0         |                   | 0                    | 5.01 |  |
| 5.02                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 5.02 |  |
| 5.03                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 5.03 |  |
| Provider to Program           |                                                                                                                                                                                                                        |                  |           |                   |                      |      |  |
| 5.50                          | TENTATIVE TO PROGRAM                                                                                                                                                                                                   |                  | 0         |                   | 0                    | 5.50 |  |
| 5.51                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 5.51 |  |
| 5.52                          |                                                                                                                                                                                                                        |                  | 0         |                   | 0                    | 5.52 |  |
| 5.99                          | Subtotal (sum of lines 5.01-5.49 minus sum of lines 5.50-5.98)                                                                                                                                                         |                  | 0         |                   | 0                    | 5.99 |  |
| 6.00                          | Determined net settlement amount (balance due) based on the cost report. (1)                                                                                                                                           |                  |           |                   |                      | 6.00 |  |
| 6.01                          | SETTLEMENT TO PROVIDER                                                                                                                                                                                                 |                  | 774,200   |                   | 0                    | 6.01 |  |
| 6.02                          | SETTLEMENT TO PROGRAM                                                                                                                                                                                                  |                  | 0         |                   | 0                    | 6.02 |  |
| 7.00                          | Total Medicare program liability (see instructions)                                                                                                                                                                    |                  | 8,057,618 |                   | 0                    | 7.00 |  |
|                               |                                                                                                                                                                                                                        |                  |           | Contractor Number | NPR Date (Mo/Day/Yr) |      |  |
|                               |                                                                                                                                                                                                                        | 0                |           | 1.00              | 2.00                 |      |  |
| 8.00                          | Name of Contractor                                                                                                                                                                                                     |                  |           |                   |                      |      |  |

## CALCULATION OF REIMBURSEMENT SETTLEMENT FOR HIT

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet E-1  
Part II  
Date/Time Prepared:  
11/24/2019 4:22 pm

Title XVIII

Hospital

PPS

1.00

## TO BE COMPLETED BY CONTRACTOR FOR NONSTANDARD COST REPORTS

## HEALTH INFORMATION TECHNOLOGY DATA COLLECTION AND CALCULATION

|                                                  |                                                                                                                |       |
|--------------------------------------------------|----------------------------------------------------------------------------------------------------------------|-------|
| 1.00                                             | Total hospital discharges as defined in AARA §4102 from Wkst. S-3, Pt. I col. 15 line 14                       | 1.00  |
| 2.00                                             | Medicare days from Wkst. S-3, Pt. I, col. 6 sum of lines 1, 8-12                                               | 2.00  |
| 3.00                                             | Medicare HMO days from Wkst. S-3, Pt. I, col. 6. line 2                                                        | 3.00  |
| 4.00                                             | Total inpatient days from S-3, Pt. I col. 8 sum of lines 1, 8-12                                               | 4.00  |
| 5.00                                             | Total hospital charges from Wkst C, Pt. I, col. 8 line 200                                                     | 5.00  |
| 6.00                                             | Total hospital charity care charges from Wkst. S-10, col. 3 line 20                                            | 6.00  |
| 7.00                                             | CAH only - The reasonable cost incurred for the purchase of certified HIT technology Wkst. S-2, Pt. I line 168 | 7.00  |
| 8.00                                             | Calculation of the HIT incentive payment (see instructions)                                                    | 8.00  |
| 9.00                                             | Sequestration adjustment amount (see instructions)                                                             | 9.00  |
| 10.00                                            | Calculation of the HIT incentive payment after sequestration (see instructions)                                | 10.00 |
| INPATIENT HOSPITAL SERVICES UNDER THE IPPS & CAH |                                                                                                                |       |
| 30.00                                            | Initial/interim HIT payment adjustment (see instructions)                                                      | 30.00 |
| 31.00                                            | Other Adjustment (specify)                                                                                     | 31.00 |
| 32.00                                            | Balance due provider (line 8 (or line 10) minus line 30 and line 31) (see instructions)                        | 32.00 |

| CALCULATION OF REIMBURSEMENT SETTLEMENT      |                                                                                                                                                                                                                                                                | Provider CCN: 14-0119<br>Component CCN: 14-S119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet E-3<br>Part II<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|-----------------------------------------------------------------------|
|                                              |                                                                                                                                                                                                                                                                | Title XVIII                                     | Subprovider -<br>IPF                        | PPS                                                                   |
|                                              |                                                                                                                                                                                                                                                                | 1.00                                            |                                             |                                                                       |
| PART II - MEDICARE PART A SERVICES - IPF PPS |                                                                                                                                                                                                                                                                |                                                 |                                             |                                                                       |
| 1.00                                         | Net Federal IPF PPS Payments (excluding outlier, ECT, and medical education payments)                                                                                                                                                                          |                                                 | 1,548,731                                   | 1.00                                                                  |
| 2.00                                         | Net IPF PPS Outlier Payments                                                                                                                                                                                                                                   |                                                 | 27,306                                      | 2.00                                                                  |
| 3.00                                         | Net IPF PPS ECT Payments                                                                                                                                                                                                                                       |                                                 | 64,026                                      | 3.00                                                                  |
| 4.00                                         | Unweighted intern and resident FTE count in the most recent cost report filed on or before November 15, 2004. (see instructions)                                                                                                                               |                                                 | 11.57                                       | 4.00                                                                  |
| 4.01                                         | Cap increases for the unweighted intern and resident FTE count for residents that were displaced by program or hospital closure, that would not be counted without a temporary cap adjustment under 42 CFR §412.424(d)(1)(iii)(F)(1) or (2) (see instructions) |                                                 | 0.00                                        | 4.01                                                                  |
| 5.00                                         | New Teaching program adjustment. (see instructions)                                                                                                                                                                                                            |                                                 | 0.00                                        | 5.00                                                                  |
| 6.00                                         | Current year's unweighted FTE count of I&R excluding FTEs in the new program growth period of a "new teaching program" (see instructions)                                                                                                                      |                                                 | 4.81                                        | 6.00                                                                  |
| 7.00                                         | Current year's unweighted I&R FTE count for residents within the new program growth period of a "new teaching program" (see instructions)                                                                                                                      |                                                 | 0.00                                        | 7.00                                                                  |
| 8.00                                         | Intern and resident count for IPF PPS medical education adjustment (see instructions)                                                                                                                                                                          |                                                 | 4.81                                        | 8.00                                                                  |
| 9.00                                         | Average Daily Census (see instructions)                                                                                                                                                                                                                        |                                                 | 19.200000                                   | 9.00                                                                  |
| 10.00                                        | Teaching Adjustment Factor $\{((1 + (\text{line 8/line 9})) \text{ raised to the power of } .5150 - 1)\}$ .                                                                                                                                                    |                                                 | 0.122023                                    | 10.00                                                                 |
| 11.00                                        | Teaching Adjustment (line 1 multiplied by line 10).                                                                                                                                                                                                            |                                                 | 188,981                                     | 11.00                                                                 |
| 12.00                                        | Adjusted Net IPF PPS Payments (sum of lines 1, 2, 3 and 11)                                                                                                                                                                                                    |                                                 | 1,829,044                                   | 12.00                                                                 |
| 13.00                                        | Nursing and Allied Health Managed Care payment (see instruction)                                                                                                                                                                                               |                                                 | 0                                           | 13.00                                                                 |
| 14.00                                        | Organ acquisition (DO NOT USE THIS LINE)                                                                                                                                                                                                                       |                                                 | 0                                           | 14.00                                                                 |
| 15.00                                        | Cost of physicians' services in a teaching hospital (see instructions)                                                                                                                                                                                         |                                                 | 0                                           | 15.00                                                                 |
| 16.00                                        | Subtotal (see instructions)                                                                                                                                                                                                                                    |                                                 | 1,829,044                                   | 16.00                                                                 |
| 17.00                                        | Primary payer payments                                                                                                                                                                                                                                         |                                                 | 5,300                                       | 17.00                                                                 |
| 18.00                                        | Subtotal (line 16 less line 17).                                                                                                                                                                                                                               |                                                 | 1,823,744                                   | 18.00                                                                 |
| 19.00                                        | Deductibles                                                                                                                                                                                                                                                    |                                                 | 112,033                                     | 19.00                                                                 |
| 20.00                                        | Subtotal (line 18 minus line 19)                                                                                                                                                                                                                               |                                                 | 1,711,711                                   | 20.00                                                                 |
| 21.00                                        | Coinsurance                                                                                                                                                                                                                                                    |                                                 | 66,085                                      | 21.00                                                                 |
| 22.00                                        | Subtotal (line 20 minus line 21)                                                                                                                                                                                                                               |                                                 | 1,645,626                                   | 22.00                                                                 |
| 23.00                                        | Allowable bad debts (exclude bad debts for professional services) (see instructions)                                                                                                                                                                           |                                                 | 0                                           | 23.00                                                                 |
| 24.00                                        | Adjusted reimbursable bad debts (see instructions)                                                                                                                                                                                                             |                                                 | 0                                           | 24.00                                                                 |
| 25.00                                        | Allowable bad debts for dual eligible beneficiaries (see instructions)                                                                                                                                                                                         |                                                 | 0                                           | 25.00                                                                 |
| 26.00                                        | Subtotal (sum of lines 22 and 24)                                                                                                                                                                                                                              |                                                 | 1,645,626                                   | 26.00                                                                 |
| 27.00                                        | Direct graduate medical education payments (from Wkst. E-4, line 49)                                                                                                                                                                                           |                                                 | 0                                           | 27.00                                                                 |
| 28.00                                        | Other pass through costs (see instructions)                                                                                                                                                                                                                    |                                                 | 172,970                                     | 28.00                                                                 |
| 29.00                                        | Outlier payments reconciliation                                                                                                                                                                                                                                |                                                 | 0                                           | 29.00                                                                 |
| 30.00                                        | OTHER ADJUSTMENTS (SEE INSTRUCTIONS) (SPECIFY)                                                                                                                                                                                                                 |                                                 | 0                                           | 30.00                                                                 |
| 30.50                                        | Pioneer ACO demonstration payment adjustment (see instructions)                                                                                                                                                                                                |                                                 | 0                                           | 30.50                                                                 |
| 30.99                                        | Demonstration payment adjustment amount before sequestration                                                                                                                                                                                                   |                                                 | 0                                           | 30.99                                                                 |
| 31.00                                        | Total amount payable to the provider (see instructions)                                                                                                                                                                                                        |                                                 | 1,818,596                                   | 31.00                                                                 |
| 31.01                                        | Sequestration adjustment (see instructions)                                                                                                                                                                                                                    |                                                 | 36,372                                      | 31.01                                                                 |
| 31.02                                        | Demonstration payment adjustment amount after sequestration                                                                                                                                                                                                    |                                                 | 0                                           | 31.02                                                                 |
| 32.00                                        | Interim payments                                                                                                                                                                                                                                               |                                                 | 1,546,881                                   | 32.00                                                                 |
| 33.00                                        | Tentative settlement (for contractor use only)                                                                                                                                                                                                                 |                                                 | 0                                           | 33.00                                                                 |
| 34.00                                        | Balance due provider/program (line 31 minus lines 31.01, 31.02, 32 and 33)                                                                                                                                                                                     |                                                 | 235,343                                     | 34.00                                                                 |
| 35.00                                        | Protested amounts (nonallowable cost report items) in accordance with CMS Pub. 15-2, chapter 1, §115.2                                                                                                                                                         |                                                 | 0                                           | 35.00                                                                 |
| TO BE COMPLETED BY CONTRACTOR                |                                                                                                                                                                                                                                                                |                                                 |                                             |                                                                       |
| 50.00                                        | Original outlier amount from Worksheet E-3, Part II, line 2                                                                                                                                                                                                    |                                                 | 27,306                                      | 50.00                                                                 |
| 51.00                                        | Outlier reconciliation adjustment amount (see instructions)                                                                                                                                                                                                    |                                                 | 0                                           | 51.00                                                                 |
| 52.00                                        | The rate used to calculate the Time Value of Money                                                                                                                                                                                                             |                                                 | 0.00                                        | 52.00                                                                 |
| 53.00                                        | Time Value of Money (see instructions)                                                                                                                                                                                                                         |                                                 | 0                                           | 53.00                                                                 |

| CALCULATION OF REIMBURSEMENT SETTLEMENT       |                                                                                                                                                                                                                                                                | Provider CCN: 14-0119<br>Component CCN: 14-T119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet E-3<br>Part III<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|-----------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------|---------------------------------------------|------------------------------------------------------------------------|
|                                               |                                                                                                                                                                                                                                                                | Title XVIII                                     | Subprovider -<br>IRF                        | PPS                                                                    |
|                                               |                                                                                                                                                                                                                                                                | 1.00                                            |                                             |                                                                        |
| PART III - MEDICARE PART A SERVICES - IRF PPS |                                                                                                                                                                                                                                                                |                                                 |                                             |                                                                        |
| 1.00                                          | Net Federal PPS Payment (see instructions)                                                                                                                                                                                                                     | 6,498,257 1.00                                  |                                             |                                                                        |
| 2.00                                          | Medicare SSI ratio (IRF PPS only) (see instructions)                                                                                                                                                                                                           | 0.0765 2.00                                     |                                             |                                                                        |
| 3.00                                          | Inpatient Rehabilitation LIP Payments (see instructions)                                                                                                                                                                                                       | 662,822 3.00                                    |                                             |                                                                        |
| 4.00                                          | Outlier Payments                                                                                                                                                                                                                                               | 3,458 4.00                                      |                                             |                                                                        |
| 5.00                                          | Unweighted intern and resident FTE count in the most recent cost reporting period ending on or prior to November 15, 2004 (see instructions)                                                                                                                   | 5.11 5.00                                       |                                             |                                                                        |
| 5.01                                          | Cap increases for the unweighted intern and resident FTE count for residents that were displaced by program or hospital closure, that would not be counted without a temporary cap adjustment under 42 CFR §412.424(d)(1)(iii)(F)(1) or (2) (see instructions) | 0.00 5.01                                       |                                             |                                                                        |
| 6.00                                          | New Teaching program adjustment. (see instructions)                                                                                                                                                                                                            | 0.00 6.00                                       |                                             |                                                                        |
| 7.00                                          | Current year's unweighted FTE count of I&R excluding FTEs in the new program growth period of a "new teaching program" (see instructions)                                                                                                                      | 3.71 7.00                                       |                                             |                                                                        |
| 8.00                                          | Current year's unweighted I&R FTE count for residents within the new program growth period of a "new teaching program" (see instructions)                                                                                                                      | 0.00 8.00                                       |                                             |                                                                        |
| 9.00                                          | Intern and resident count for IRF PPS medical education adjustment (see instructions)                                                                                                                                                                          | 3.71 9.00                                       |                                             |                                                                        |
| 10.00                                         | Average Daily Census (see instructions)                                                                                                                                                                                                                        | 25.276712 10.00                                 |                                             |                                                                        |
| 11.00                                         | Teaching Adjustment Factor (see instructions)                                                                                                                                                                                                                  | 0.149338 11.00                                  |                                             |                                                                        |
| 12.00                                         | Teaching Adjustment (see instructions)                                                                                                                                                                                                                         | 970,437 12.00                                   |                                             |                                                                        |
| 13.00                                         | Total PPS Payment (see instructions)                                                                                                                                                                                                                           | 8,134,974 13.00                                 |                                             |                                                                        |
| 14.00                                         | Nursing and Allied Health Managed Care payments (see instruction)                                                                                                                                                                                              | 0 14.00                                         |                                             |                                                                        |
| 15.00                                         | Organ acquisition (DO NOT USE THIS LINE)                                                                                                                                                                                                                       | 0 15.00                                         |                                             |                                                                        |
| 16.00                                         | Cost of physicians' services in a teaching hospital (see instructions)                                                                                                                                                                                         | 0 16.00                                         |                                             |                                                                        |
| 17.00                                         | Subtotal (see instructions)                                                                                                                                                                                                                                    | 8,134,974 17.00                                 |                                             |                                                                        |
| 18.00                                         | Primary payer payments                                                                                                                                                                                                                                         | 5,878 18.00                                     |                                             |                                                                        |
| 19.00                                         | Subtotal (line 17 less line 18).                                                                                                                                                                                                                               | 8,129,096 19.00                                 |                                             |                                                                        |
| 20.00                                         | Deductibles                                                                                                                                                                                                                                                    | 19,335 20.00                                    |                                             |                                                                        |
| 21.00                                         | Subtotal (line 19 minus line 20)                                                                                                                                                                                                                               | 8,109,761 21.00                                 |                                             |                                                                        |
| 22.00                                         | Coinsurance                                                                                                                                                                                                                                                    | 60,345 22.00                                    |                                             |                                                                        |
| 23.00                                         | Subtotal (line 21 minus line 22)                                                                                                                                                                                                                               | 8,049,416 23.00                                 |                                             |                                                                        |
| 24.00                                         | Allowable bad debts (exclude bad debts for professional services) (see instructions)                                                                                                                                                                           | 0 24.00                                         |                                             |                                                                        |
| 25.00                                         | Adjusted reimbursable bad debts (see instructions)                                                                                                                                                                                                             | 0 25.00                                         |                                             |                                                                        |
| 26.00                                         | Allowable bad debts for dual eligible beneficiaries (see instructions)                                                                                                                                                                                         | 0 26.00                                         |                                             |                                                                        |
| 27.00                                         | Subtotal (sum of lines 23 and 25)                                                                                                                                                                                                                              | 8,049,416 27.00                                 |                                             |                                                                        |
| 28.00                                         | Direct graduate medical education payments (from Wkst. E-4, line 49)                                                                                                                                                                                           | 0 28.00                                         |                                             |                                                                        |
| 29.00                                         | Other pass through costs (see instructions)                                                                                                                                                                                                                    | 172,643 29.00                                   |                                             |                                                                        |
| 30.00                                         | Outlier payments reconciliation                                                                                                                                                                                                                                | 0 30.00                                         |                                             |                                                                        |
| 31.00                                         | OTHER ADJUSTMENTS (SEE INSTRUCTIONS) (SPECIFY)                                                                                                                                                                                                                 | 0 31.00                                         |                                             |                                                                        |
| 31.50                                         | Pioneer ACO demonstration payment adjustment (see instructions)                                                                                                                                                                                                | 0 31.50                                         |                                             |                                                                        |
| 31.99                                         | Demonstration payment adjustment amount before sequestration                                                                                                                                                                                                   | 0 31.99                                         |                                             |                                                                        |
| 32.00                                         | Total amount payable to the provider (see instructions)                                                                                                                                                                                                        | 8,222,059 32.00                                 |                                             |                                                                        |
| 32.01                                         | Sequestration adjustment (see instructions)                                                                                                                                                                                                                    | 164,441 32.01                                   |                                             |                                                                        |
| 32.02                                         | Demonstration payment adjustment amount after sequestration                                                                                                                                                                                                    | 0 32.02                                         |                                             |                                                                        |
| 33.00                                         | Interim payments                                                                                                                                                                                                                                               | 7,283,418 33.00                                 |                                             |                                                                        |
| 34.00                                         | Tentative settlement (for contractor use only)                                                                                                                                                                                                                 | 0 34.00                                         |                                             |                                                                        |
| 35.00                                         | Balance due provider/program (line 32 minus lines 32.01, 32.02, 33, and 34)                                                                                                                                                                                    | 774,200 35.00                                   |                                             |                                                                        |
| 36.00                                         | Protested amounts (nonallowable cost report items) in accordance with CMS Pub. 15-2, chapter 1, §115.2                                                                                                                                                         | 0 36.00                                         |                                             |                                                                        |
| TO BE COMPLETED BY CONTRACTOR                 |                                                                                                                                                                                                                                                                |                                                 |                                             |                                                                        |
| 50.00                                         | Original outlier amount from Wkst. E-3, Pt. III, line 4                                                                                                                                                                                                        | 3,458 50.00                                     |                                             |                                                                        |
| 51.00                                         | Outlier reconciliation adjustment amount (see instructions)                                                                                                                                                                                                    | 0 51.00                                         |                                             |                                                                        |
| 52.00                                         | The rate used to calculate the Time Value of Money                                                                                                                                                                                                             | 0.00 52.00                                      |                                             |                                                                        |
| 53.00                                         | Time Value of Money (see instructions)                                                                                                                                                                                                                         | 0 53.00                                         |                                             |                                                                        |

|                                                                                          |                                                                                                                                                                    |                       |                                             |                                                            |       |
|------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|------------------------------------------------------------|-------|
| DIRECT GRADUATE MEDICAL EDUCATION (GME) & ESRD OUTPATIENT DIRECT MEDICAL EDUCATION COSTS |                                                                                                                                                                    | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet E-4<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |       |
|                                                                                          |                                                                                                                                                                    | Title XVIII           | Hospital                                    | PPS                                                        |       |
|                                                                                          |                                                                                                                                                                    |                       |                                             | 1.00                                                       |       |
| COMPUTATION OF TOTAL DIRECT GME AMOUNT                                                   |                                                                                                                                                                    |                       |                                             |                                                            |       |
| 1.00                                                                                     | Unweighted resident FTE count for allopathic and osteopathic programs for cost reporting periods ending on or before December 31, 1996.                            |                       |                                             | 440.41                                                     | 1.00  |
| 2.00                                                                                     | Unweighted FTE resident cap add-on for new programs per 42 CFR 413.79(e)(1) (see instructions)                                                                     |                       |                                             | 0.00                                                       | 2.00  |
| 3.00                                                                                     | Amount of reduction to Direct GME cap under section 422 of MMA                                                                                                     |                       |                                             | 4.86                                                       | 3.00  |
| 3.01                                                                                     | Direct GME cap reduction amount under ACA §5503 in accordance with 42 CFR §413.79 (m). (see instructions for cost reporting periods straddling 7/1/2011)           |                       |                                             | 0.00                                                       | 3.01  |
| 4.00                                                                                     | Adjustment (plus or minus) to the FTE cap for allopathic and osteopathic programs due to a Medicare GME affiliation agreement (42 CFR §413.75(b) and § 413.79 (f)) |                       |                                             | 60.00                                                      | 4.00  |
| 4.01                                                                                     | ACA Section 5503 increase to the Direct GME FTE Cap (see instructions for cost reporting periods straddling 7/1/2011)                                              |                       |                                             | 0.00                                                       | 4.01  |
| 4.02                                                                                     | ACA Section 5506 number of additional direct GME FTE cap slots (see instructions for cost reporting periods straddling 7/1/2011)                                   |                       |                                             | 0.00                                                       | 4.02  |
| 5.00                                                                                     | FTE adjusted cap (line 1 plus line 2 minus line 3 and 3.01 plus or minus line 4 plus lines 4.01 and 4.02 plus applicable subscripts)                               |                       |                                             | 495.55                                                     | 5.00  |
| 6.00                                                                                     | Unweighted resident FTE count for allopathic and osteopathic programs for the current year from your records (see instructions)                                    |                       |                                             | 584.75                                                     | 6.00  |
| 7.00                                                                                     | Enter the lesser of line 5 or line 6                                                                                                                               |                       |                                             | 495.55                                                     | 7.00  |
|                                                                                          |                                                                                                                                                                    | Primary Care          | Other                                       | Total                                                      |       |
|                                                                                          |                                                                                                                                                                    | 1.00                  | 2.00                                        | 3.00                                                       |       |
| 8.00                                                                                     | Weighted FTE count for physicians in an allopathic and osteopathic program for the current year.                                                                   | 180.22                | 342.96                                      | 523.18                                                     | 8.00  |
| 9.00                                                                                     | If line 6 is less than 5 enter the amount from line 8, otherwise multiply line 8 times the result of line 5 divided by the amount on line 6.                       | 152.73                | 290.64                                      | 443.37                                                     | 9.00  |
| 10.00                                                                                    | Weighted dental and podiatric resident FTE count for the current year                                                                                              |                       | 3.33                                        |                                                            | 10.00 |
| 10.01                                                                                    | Unweighted dental and podiatric resident FTE count for the current year                                                                                            |                       | 0.00                                        |                                                            | 10.01 |
| 11.00                                                                                    | Total weighted FTE count                                                                                                                                           | 152.73                | 293.97                                      |                                                            | 11.00 |
| 12.00                                                                                    | Total weighted resident FTE count for the prior cost reporting year (see instructions)                                                                             | 162.96                | 270.32                                      |                                                            | 12.00 |
| 13.00                                                                                    | Total weighted resident FTE count for the penultimate cost reporting year (see instructions)                                                                       | 165.35                | 277.21                                      |                                                            | 13.00 |
| 14.00                                                                                    | Rolling average FTE count (sum of lines 11 through 13 divided by 3).                                                                                               | 160.35                | 280.50                                      |                                                            | 14.00 |
| 15.00                                                                                    | Adjustment for residents in initial years of new programs                                                                                                          | 0.00                  | 0.00                                        |                                                            | 15.00 |
| 15.01                                                                                    | Unweighted adjustment for residents in initial years of new programs                                                                                               | 0.00                  | 0.50                                        |                                                            | 15.01 |
| 16.00                                                                                    | Adjustment for residents displaced by program or hospital closure                                                                                                  | 0.00                  | 0.00                                        |                                                            | 16.00 |
| 16.01                                                                                    | Unweighted adjustment for residents displaced by program or hospital closure                                                                                       | 0.00                  | 0.00                                        |                                                            | 16.01 |
| 17.00                                                                                    | Adjusted rolling average FTE count                                                                                                                                 | 160.35                | 280.50                                      |                                                            | 17.00 |
| 18.00                                                                                    | Per resident amount                                                                                                                                                | 102,406.44            | 101,813.37                                  |                                                            | 18.00 |
| 19.00                                                                                    | Approved amount for resident costs                                                                                                                                 | 16,420,873            | 28,558,650                                  | 44,979,523                                                 | 19.00 |
|                                                                                          |                                                                                                                                                                    |                       |                                             | 1.00                                                       |       |
| 20.00                                                                                    | Additional unweighted allopathic and osteopathic direct GME FTE resident cap slots received under 42 Sec. 413.79(c)(4)                                             |                       |                                             | 0.00                                                       | 20.00 |
| 21.00                                                                                    | Direct GME FTE unweighted resident count over cap (see instructions)                                                                                               |                       |                                             | 89.20                                                      | 21.00 |
| 22.00                                                                                    | Allowable additional direct GME FTE Resident Count (see instructions)                                                                                              |                       |                                             | 0.00                                                       | 22.00 |
| 23.00                                                                                    | Enter the locality adjustment national average per resident amount (see instructions)                                                                              |                       |                                             | 0.00                                                       | 23.00 |
| 24.00                                                                                    | Multiply line 22 time line 23                                                                                                                                      |                       |                                             | 0                                                          | 24.00 |
| 25.00                                                                                    | Total direct GME amount (sum of lines 19 and 24)                                                                                                                   |                       |                                             | 44,979,523                                                 | 25.00 |
|                                                                                          |                                                                                                                                                                    | Inpatient Part        | Managed care                                |                                                            |       |
|                                                                                          |                                                                                                                                                                    | A                     |                                             |                                                            |       |
|                                                                                          |                                                                                                                                                                    | 1.00                  | 2.00                                        | 3.00                                                       |       |
| COMPUTATION OF PROGRAM PATIENT LOAD                                                      |                                                                                                                                                                    |                       |                                             |                                                            |       |
| 26.00                                                                                    | Inpatient Days (see instructions)                                                                                                                                  | 54,664                | 10,933                                      |                                                            | 26.00 |
| 27.00                                                                                    | Total Inpatient Days (see instructions)                                                                                                                            | 178,851               | 178,851                                     |                                                            | 27.00 |
| 28.00                                                                                    | Ratio of inpatient days to total inpatient days                                                                                                                    | 0.305640              | 0.061129                                    |                                                            | 28.00 |
| 29.00                                                                                    | Program direct GME amount                                                                                                                                          | 13,747,541            | 2,749,553                                   |                                                            | 29.00 |
| 30.00                                                                                    | Reduction for direct GME payments for Medicare Advantage                                                                                                           |                       | 388,512                                     |                                                            | 30.00 |
| 31.00                                                                                    | Net Program direct GME amount                                                                                                                                      |                       |                                             | 16,108,582                                                 | 31.00 |

| DIRECT GRADUATE MEDICAL EDUCATION (GME) & ESRD OUTPATIENT DIRECT MEDICAL EDUCATION COSTS |                                                                                                                            | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet E-4<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |       |
|------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|------------------------------------------------------------|-------|
|                                                                                          |                                                                                                                            | Title XVIII           | Hospital                                    | PPS                                                        |       |
|                                                                                          |                                                                                                                            |                       |                                             | 1.00                                                       |       |
|                                                                                          | DIRECT MEDICAL EDUCATION COSTS FOR ESRD COMPOSITE RATE - TITLE XVIII ONLY (NURSING SCHOOL AND PARAMEDICAL EDUCATION COSTS) |                       |                                             |                                                            |       |
| 32.00                                                                                    | Renal dialysis direct medical education costs (from Wkst. B, Pt. I, sum of col. 20 and 23, lines 74 and 94)                |                       |                                             | 0                                                          | 32.00 |
| 33.00                                                                                    | Renal dialysis and home dialysis total charges (Wkst. C, Pt. I, col. 8, sum of lines 74 and 94)                            |                       |                                             | 0                                                          | 33.00 |
| 34.00                                                                                    | Ratio of direct medical education costs to total charges (line 32 ÷ line 33)                                               |                       |                                             | 0.000000                                                   | 34.00 |
| 35.00                                                                                    | Medicare outpatient ESRD charges (see instructions)                                                                        |                       |                                             | 0                                                          | 35.00 |
| 36.00                                                                                    | Medicare outpatient ESRD direct medical education costs (line 34 x line 35)                                                |                       |                                             | 0                                                          | 36.00 |
| APPORTIONMENT BASED ON MEDICARE REASONABLE COST - TITLE XVIII ONLY                       |                                                                                                                            |                       |                                             |                                                            |       |
| Part A Reasonable Cost                                                                   |                                                                                                                            |                       |                                             |                                                            |       |
| 37.00                                                                                    | Reasonable cost (see instructions)                                                                                         |                       |                                             | 198,859,071                                                | 37.00 |
| 38.00                                                                                    | Organ acquisition costs (Wkst. D-4, Pt. III, col. 1, line 69)                                                              |                       |                                             | 11,261,728                                                 | 38.00 |
| 39.00                                                                                    | Cost of physicians' services in a teaching hospital (see instructions)                                                     |                       |                                             | 0                                                          | 39.00 |
| 40.00                                                                                    | Primary payer payments (see instructions)                                                                                  |                       |                                             | 87,091                                                     | 40.00 |
| 41.00                                                                                    | Total Part A reasonable cost (sum of lines 37 through 39 minus line 40)                                                    |                       |                                             | 210,033,708                                                | 41.00 |
| Part B Reasonable Cost                                                                   |                                                                                                                            |                       |                                             |                                                            |       |
| 42.00                                                                                    | Reasonable cost (see instructions)                                                                                         |                       |                                             | 129,004,093                                                | 42.00 |
| 43.00                                                                                    | Primary payer payments (see instructions)                                                                                  |                       |                                             | 5,097                                                      | 43.00 |
| 44.00                                                                                    | Total Part B reasonable cost (line 42 minus line 43)                                                                       |                       |                                             | 128,998,996                                                | 44.00 |
| 45.00                                                                                    | Total reasonable cost (sum of lines 41 and 44)                                                                             |                       |                                             | 339,032,704                                                | 45.00 |
| 46.00                                                                                    | Ratio of Part A reasonable cost to total reasonable cost (line 41 ÷ line 45)                                               |                       |                                             | 0.619509                                                   | 46.00 |
| 47.00                                                                                    | Ratio of Part B reasonable cost to total reasonable cost (line 44 ÷ line 45)                                               |                       |                                             | 0.380491                                                   | 47.00 |
| ALLOCATION OF MEDICARE DIRECT GME COSTS BETWEEN PART A AND PART B                        |                                                                                                                            |                       |                                             |                                                            |       |
| 48.00                                                                                    | Total program GME payment (line 31)                                                                                        |                       |                                             | 16,108,582                                                 | 48.00 |
| 49.00                                                                                    | Part A Medicare GME payment (line 46 x 48) (title XVIII only) (see instructions)                                           |                       |                                             | 9,979,412                                                  | 49.00 |
| 50.00                                                                                    | Part B Medicare GME payment (line 47 x 48) (title XVIII only) (see instructions)                                           |                       |                                             | 6,129,170                                                  | 50.00 |

BALANCE SHEET (If you are nonproprietary and do not maintain fund-type accounting records, complete the General Fund column only)

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet G

Date/Time Prepared:  
11/24/2019 4:22 pm

|                              |                                                                                | General Fund   | Specific Purpose Fund | Endowment Fund | Plant Fund |       |
|------------------------------|--------------------------------------------------------------------------------|----------------|-----------------------|----------------|------------|-------|
|                              |                                                                                | 1.00           | 2.00                  | 3.00           | 4.00       |       |
| <b>CURRENT ASSETS</b>        |                                                                                |                |                       |                |            |       |
| 1.00                         | Cash on hand in banks                                                          | 100,523,138    | 0                     | 0              | 0          | 1.00  |
| 2.00                         | Temporary investments                                                          | 888,919,863    | 0                     | 0              | 0          | 2.00  |
| 3.00                         | Notes receivable                                                               | 0              | 0                     | 0              | 0          | 3.00  |
| 4.00                         | Accounts receivable                                                            | 423,146,784    | 0                     | 0              | 0          | 4.00  |
| 5.00                         | Other receivable                                                               | 76,524,675     | 0                     | 0              | 0          | 5.00  |
| 6.00                         | Allowances for uncollectible notes and accounts receivable                     | -65,566,423    | 0                     | 0              | 0          | 6.00  |
| 7.00                         | Inventory                                                                      | 34,161,165     | 0                     | 0              | 0          | 7.00  |
| 8.00                         | Prepaid expenses                                                               | 19,719,492     | 0                     | 0              | 0          | 8.00  |
| 9.00                         | Other current assets                                                           | 30,629,000     | 0                     | 0              | 0          | 9.00  |
| 10.00                        | Due from other funds                                                           | 0              | 0                     | 0              | 0          | 10.00 |
| 11.00                        | Total current assets (sum of lines 1-10)                                       | 1,508,057,694  | 0                     | 0              | 0          | 11.00 |
| <b>FIXED ASSETS</b>          |                                                                                |                |                       |                |            |       |
| 12.00                        | Land                                                                           | 63,770,661     | 0                     | 0              | 0          | 12.00 |
| 13.00                        | Land improvements                                                              | 0              | 0                     | 0              | 0          | 13.00 |
| 14.00                        | Accumulated depreciation                                                       | 0              | 0                     | 0              | 0          | 14.00 |
| 15.00                        | Buildings                                                                      | 1,768,711,380  | 0                     | 0              | 0          | 15.00 |
| 16.00                        | Accumulated depreciation                                                       | -1,343,089,346 | 0                     | 0              | 0          | 16.00 |
| 17.00                        | Leasehold improvements                                                         | 0              | 0                     | 0              | 0          | 17.00 |
| 18.00                        | Accumulated depreciation                                                       | 0              | 0                     | 0              | 0          | 18.00 |
| 19.00                        | Fixed equipment                                                                | 195,934,097    | 0                     | 0              | 0          | 19.00 |
| 20.00                        | Accumulated depreciation                                                       | 0              | 0                     | 0              | 0          | 20.00 |
| 21.00                        | Automobiles and trucks                                                         | 0              | 0                     | 0              | 0          | 21.00 |
| 22.00                        | Accumulated depreciation                                                       | 0              | 0                     | 0              | 0          | 22.00 |
| 23.00                        | Major movable equipment                                                        | 622,129,570    | 0                     | 0              | 0          | 23.00 |
| 24.00                        | Accumulated depreciation                                                       | 0              | 0                     | 0              | 0          | 24.00 |
| 25.00                        | Minor equipment depreciable                                                    | 0              | 0                     | 0              | 0          | 25.00 |
| 26.00                        | Accumulated depreciation                                                       | 0              | 0                     | 0              | 0          | 26.00 |
| 27.00                        | HIT designated Assets                                                          | 14,779,820     | 0                     | 0              | 0          | 27.00 |
| 28.00                        | Accumulated depreciation                                                       | 0              | 0                     | 0              | 0          | 28.00 |
| 29.00                        | Minor equipment-nondepreciable                                                 | 0              | 0                     | 0              | 0          | 29.00 |
| 30.00                        | Total fixed assets (sum of lines 12-29)                                        | 1,322,236,182  | 0                     | 0              | 0          | 30.00 |
| <b>OTHER ASSETS</b>          |                                                                                |                |                       |                |            |       |
| 31.00                        | Investments                                                                    | 126,150,363    | 0                     | 0              | 0          | 31.00 |
| 32.00                        | Deposits on leases                                                             | 0              | 0                     | 0              | 0          | 32.00 |
| 33.00                        | Due from owners/officers                                                       | 0              | 0                     | 0              | 0          | 33.00 |
| 34.00                        | Other assets                                                                   | 0              | 47,862,435            | 596,108,503    | 816,677    | 34.00 |
| 35.00                        | Total other assets (sum of lines 31-34)                                        | 126,150,363    | 47,862,435            | 596,108,503    | 816,677    | 35.00 |
| 36.00                        | Total assets (sum of lines 11, 30, and 35)                                     | 2,956,444,239  | 47,862,435            | 596,108,503    | 816,677    | 36.00 |
| <b>CURRENT LIABILITIES</b>   |                                                                                |                |                       |                |            |       |
| 37.00                        | Accounts payable                                                               | 36,299,411     | 0                     | 0              | 0          | 37.00 |
| 38.00                        | Salaries, wages, and fees payable                                              | 300,203,617    | 0                     | 0              | 0          | 38.00 |
| 39.00                        | Payroll taxes payable                                                          | 0              | 0                     | 0              | 0          | 39.00 |
| 40.00                        | Notes and loans payable (short term)                                           | 11,625,000     | 0                     | 0              | 0          | 40.00 |
| 41.00                        | Deferred income                                                                | 17,972,967     | 0                     | 0              | 0          | 41.00 |
| 42.00                        | Accelerated payments                                                           | 0              | 0                     | 0              | 0          | 42.00 |
| 43.00                        | Due to other funds                                                             | 0              | 0                     | 0              | 0          | 43.00 |
| 44.00                        | Other current liabilities                                                      | 189,972,216    | 0                     | 0              | 0          | 44.00 |
| 45.00                        | Total current liabilities (sum of lines 37 thru 44)                            | 556,073,211    | 0                     | 0              | 0          | 45.00 |
| <b>LONG TERM LIABILITIES</b> |                                                                                |                |                       |                |            |       |
| 46.00                        | Mortgage payable                                                               | 192,410,223    | 0                     | 0              | 0          | 46.00 |
| 47.00                        | Notes payable                                                                  | 484,836,409    | 0                     | 0              | 0          | 47.00 |
| 48.00                        | Unsecured loans                                                                | 47,724,020     | 0                     | 0              | 0          | 48.00 |
| 49.00                        | Other long term liabilities                                                    | 151,704,151    | 0                     | 0              | 0          | 49.00 |
| 50.00                        | Total long term liabilities (sum of lines 46 thru 49)                          | 876,674,803    | 0                     | 0              | 0          | 50.00 |
| 51.00                        | Total liabilities (sum of lines 45 and 50)                                     | 1,432,748,014  | 0                     | 0              | 0          | 51.00 |
| <b>CAPITAL ACCOUNTS</b>      |                                                                                |                |                       |                |            |       |
| 52.00                        | General fund balance                                                           | 1,523,696,225  |                       |                |            | 52.00 |
| 53.00                        | Specific purpose fund                                                          |                | 47,862,435            |                |            | 53.00 |
| 54.00                        | Donor created - endowment fund balance - restricted                            |                |                       | 596,108,503    |            | 54.00 |
| 55.00                        | Donor created - endowment fund balance - unrestricted                          |                |                       | 0              |            | 55.00 |
| 56.00                        | Governing body created - endowment fund balance                                |                |                       | 0              |            | 56.00 |
| 57.00                        | Plant fund balance - invested in plant                                         |                |                       |                | 816,677    | 57.00 |
| 58.00                        | Plant fund balance - reserve for plant improvement, replacement, and expansion |                |                       |                | 0          | 58.00 |
| 59.00                        | Total fund balances (sum of lines 52 thru 58)                                  | 1,523,696,225  | 47,862,435            | 596,108,503    | 816,677    | 59.00 |
| 60.00                        | Total liabilities and fund balances (sum of lines 51 and 59)                   | 2,956,444,239  | 47,862,435            | 596,108,503    | 816,677    | 60.00 |

## STATEMENT OF CHANGES IN FUND BALANCES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet G-1

Date/Time Prepared:  
11/24/2019 4:22 pm

|       |                                                                         | General Fund   |               | Special Purpose Fund |            | Endowment Fund |       |
|-------|-------------------------------------------------------------------------|----------------|---------------|----------------------|------------|----------------|-------|
|       |                                                                         | 1.00           | 2.00          | 3.00                 | 4.00       | 5.00           |       |
| 1.00  | Fund balances at beginning of period                                    |                | 1,429,867,927 |                      | 31,500,360 |                | 1.00  |
| 2.00  | Net income (loss) (from Wkst. G-3, line 29)                             |                | 67,980,536    |                      |            |                | 2.00  |
| 3.00  | Total (sum of line 1 and line 2)                                        |                | 1,497,848,463 |                      | 31,500,360 |                | 3.00  |
| 4.00  | ADDITIONS                                                               | 25,847,762     |               | 16,362,075           |            | 11,309,033     | 4.00  |
| 5.00  |                                                                         | 0              |               | 0                    |            | 0              | 5.00  |
| 6.00  |                                                                         | 0              |               | 0                    |            | 0              | 6.00  |
| 7.00  |                                                                         | 0              |               | 0                    |            | 0              | 7.00  |
| 8.00  |                                                                         | 0              |               | 0                    |            | 0              | 8.00  |
| 9.00  |                                                                         | 0              |               | 0                    |            | 0              | 9.00  |
| 10.00 | Total additions (sum of line 4-9)                                       |                | 25,847,762    |                      | 16,362,075 |                | 10.00 |
| 11.00 | Subtotal (line 3 plus line 10)                                          |                | 1,523,696,225 |                      | 47,862,435 |                | 11.00 |
| 12.00 | DEDUCTIONS                                                              | 0              |               | 0                    |            | 0              | 12.00 |
| 13.00 |                                                                         | 0              |               | 0                    |            | 0              | 13.00 |
| 14.00 |                                                                         | 0              |               | 0                    |            | 0              | 14.00 |
| 15.00 |                                                                         | 0              |               | 0                    |            | 0              | 15.00 |
| 16.00 |                                                                         | 0              |               | 0                    |            | 0              | 16.00 |
| 17.00 |                                                                         | 0              |               | 0                    |            | 0              | 17.00 |
| 18.00 | Total deductions (sum of lines 12-17)                                   |                | 0             |                      | 0          |                | 18.00 |
| 19.00 | Fund balance at end of period per balance sheet (line 11 minus line 18) |                | 1,523,696,225 |                      | 47,862,435 |                | 19.00 |
|       |                                                                         | Endowment Fund | Plant Fund    |                      |            |                |       |
|       |                                                                         | 6.00           | 7.00          | 8.00                 |            |                |       |
| 1.00  | Fund balances at beginning of period                                    | 584,799,470    |               | 1,526,116            |            |                | 1.00  |
| 2.00  | Net income (loss) (from Wkst. G-3, line 29)                             |                |               |                      |            |                | 2.00  |
| 3.00  | Total (sum of line 1 and line 2)                                        | 584,799,470    |               | 1,526,116            |            |                | 3.00  |
| 4.00  | ADDITIONS                                                               |                | 0             |                      |            |                | 4.00  |
| 5.00  |                                                                         |                | 0             |                      |            |                | 5.00  |
| 6.00  |                                                                         |                | 0             |                      |            |                | 6.00  |
| 7.00  |                                                                         |                | 0             |                      |            |                | 7.00  |
| 8.00  |                                                                         |                | 0             |                      |            |                | 8.00  |
| 9.00  |                                                                         |                | 0             |                      |            |                | 9.00  |
| 10.00 | Total additions (sum of line 4-9)                                       | 11,309,033     |               | 0                    |            |                | 10.00 |
| 11.00 | Subtotal (line 3 plus line 10)                                          | 596,108,503    |               | 1,526,116            |            |                | 11.00 |
| 12.00 | DEDUCTIONS                                                              |                | 709,439       |                      |            |                | 12.00 |
| 13.00 |                                                                         |                | 0             |                      |            |                | 13.00 |
| 14.00 |                                                                         |                | 0             |                      |            |                | 14.00 |
| 15.00 |                                                                         |                | 0             |                      |            |                | 15.00 |
| 16.00 |                                                                         |                | 0             |                      |            |                | 16.00 |
| 17.00 |                                                                         |                | 0             |                      |            |                | 17.00 |
| 18.00 | Total deductions (sum of lines 12-17)                                   | 0              |               | 709,439              |            |                | 18.00 |
| 19.00 | Fund balance at end of period per balance sheet (line 11 minus line 18) | 596,108,503    |               | 816,677              |            |                | 19.00 |

## STATEMENT OF PATIENT REVENUES AND OPERATING EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019Worksheet G-2  
Parts I & II  
Date/Time Prepared:  
11/24/2019 4:22 pm

| Cost Center Description                                |                                                                                                | Inpatient     | Outpatient    | Total         |       |
|--------------------------------------------------------|------------------------------------------------------------------------------------------------|---------------|---------------|---------------|-------|
|                                                        |                                                                                                | 1.00          | 2.00          | 3.00          |       |
| <b>PART I - PATIENT REVENUES</b>                       |                                                                                                |               |               |               |       |
| <b>General Inpatient Routine Services</b>              |                                                                                                |               |               |               |       |
| 1.00                                                   | Hospital                                                                                       | 259,935,221   |               | 259,935,221   | 1.00  |
| 2.00                                                   | SUBPROVIDER - IPF                                                                              | 16,288,765    |               | 16,288,765    | 2.00  |
| 3.00                                                   | SUBPROVIDER - IRF                                                                              | 21,358,190    |               | 21,358,190    | 3.00  |
| 4.00                                                   | SUBPROVIDER                                                                                    |               |               |               | 4.00  |
| 5.00                                                   | Swing bed - SNF                                                                                | 0             |               | 0             | 5.00  |
| 6.00                                                   | Swing bed - NF                                                                                 | 0             |               | 0             | 6.00  |
| 7.00                                                   | SKILLED NURSING FACILITY                                                                       |               |               |               | 7.00  |
| 8.00                                                   | NURSING FACILITY                                                                               |               |               |               | 8.00  |
| 9.00                                                   | OTHER LONG TERM CARE                                                                           |               |               |               | 9.00  |
| 10.00                                                  | Total general inpatient care services (sum of lines 1-9)                                       | 297,582,176   |               | 297,582,176   | 10.00 |
| <b>Intensive Care Type Inpatient Hospital Services</b> |                                                                                                |               |               |               |       |
| 11.00                                                  | INTENSIVE CARE UNIT                                                                            |               |               |               | 11.00 |
| 12.00                                                  | CORONARY CARE UNIT                                                                             |               |               |               | 12.00 |
| 13.00                                                  | BURN INTENSIVE CARE UNIT                                                                       |               |               |               | 13.00 |
| 14.00                                                  | SURGICAL INTENSIVE CARE UNIT                                                                   | 78,386,521    |               | 78,386,521    | 14.00 |
| 15.00                                                  | MEDICAL INTENSIVE CARE UNIT                                                                    | 79,550,791    |               | 79,550,791    | 15.00 |
| 15.01                                                  | PEDIATRIC INTENSIVE CARE UNIT                                                                  | 22,177,645    |               | 22,177,645    | 15.01 |
| 15.02                                                  | PREMATURE INTENSIVE CARE UNIT                                                                  | 62,624,888    |               | 62,624,888    | 15.02 |
| 16.00                                                  | Total intensive care type inpatient hospital services (sum of lines 11-15)                     | 242,739,845   |               | 242,739,845   | 16.00 |
| 17.00                                                  | Total inpatient routine care services (sum of lines 10 and 16)                                 | 540,322,021   |               | 540,322,021   | 17.00 |
| 18.00                                                  | Ancillary services                                                                             | 1,597,674,452 | 13,762,720    | 1,611,437,172 | 18.00 |
| 19.00                                                  | Outpatient services                                                                            | 0             | 1,868,523,829 | 1,868,523,829 | 19.00 |
| 20.00                                                  | RURAL HEALTH CLINIC                                                                            | 0             | 0             | 0             | 20.00 |
| 21.00                                                  | FEDERALLY QUALIFIED HEALTH CENTER                                                              | 0             | 0             | 0             | 21.00 |
| 22.00                                                  | HOME HEALTH AGENCY                                                                             |               |               |               | 22.00 |
| 23.00                                                  | AMBULANCE SERVICES                                                                             |               |               |               | 23.00 |
| 24.00                                                  | CMHC                                                                                           |               |               |               | 24.00 |
| 25.00                                                  | AMBULATORY SURGICAL CENTER (D.P.)                                                              |               |               |               | 25.00 |
| 26.00                                                  | HOSPICE                                                                                        |               |               |               | 26.00 |
| 27.00                                                  | OTHER                                                                                          | 132,134,901   | 1,032,090,692 | 1,164,225,593 | 27.00 |
| 28.00                                                  | Total patient revenues (sum of lines 17-27)(transfer column 3 to Wkst. G-3, line 1)            | 2,270,131,374 | 2,914,377,241 | 5,184,508,615 | 28.00 |
| <b>PART II - OPERATING EXPENSES</b>                    |                                                                                                |               |               |               |       |
| 29.00                                                  | Operating expenses (per Wkst. A, column 3, line 200)                                           |               | 2,125,852,516 |               | 29.00 |
| 30.00                                                  | OAK PARK                                                                                       | 136,140,465   |               |               | 30.00 |
| 31.00                                                  | OAK PARK MEDICAL OFFICE BLDG                                                                   | 4,915,941     |               |               | 31.00 |
| 32.00                                                  | UNLOCATED                                                                                      | 60            |               |               | 32.00 |
| 33.00                                                  |                                                                                                | 0             |               |               | 33.00 |
| 34.00                                                  |                                                                                                | 0             |               |               | 34.00 |
| 35.00                                                  |                                                                                                | 0             |               |               | 35.00 |
| 36.00                                                  | Total additions (sum of lines 30-35)                                                           |               | 141,056,466   |               | 36.00 |
| 37.00                                                  | CONSOLIDATION ENTRY                                                                            | 72,908,289    |               |               | 37.00 |
| 38.00                                                  | PHILANTHROPY                                                                                   | 11,399,664    |               |               | 38.00 |
| 39.00                                                  | ROOM 500                                                                                       | 3,414,441     |               |               | 39.00 |
| 40.00                                                  | WOMANS BOARD                                                                                   | 895,378       |               |               | 40.00 |
| 41.00                                                  |                                                                                                | 0             |               |               | 41.00 |
| 42.00                                                  | Total deductions (sum of lines 37-41)                                                          |               | 88,617,772    |               | 42.00 |
| 43.00                                                  | Total operating expenses (sum of lines 29 and 36 minus line 42)(transfer to Wkst. G-3, line 4) |               | 2,178,291,210 |               | 43.00 |

## STATEMENT OF REVENUES AND EXPENSES

Provider CCN: 14-0119

Period:  
From 07/01/2018  
To 06/30/2019

Worksheet G-3

Date/Time Prepared:  
11/24/2019 4:22 pm

|              |                                                                           | 1.00          |       |
|--------------|---------------------------------------------------------------------------|---------------|-------|
| 1.00         | Total patient revenues (from Wkst. G-2, Part I, column 3, line 28)        | 5,184,508,615 | 1.00  |
| 2.00         | Less contractual allowances and discounts on patients' accounts           | 3,330,149,126 | 2.00  |
| 3.00         | Net patient revenues (line 1 minus line 2)                                | 1,854,359,489 | 3.00  |
| 4.00         | Less total operating expenses (from Wkst. G-2, Part II, line 43)          | 2,178,291,210 | 4.00  |
| 5.00         | Net income from service to patients (line 3 minus line 4)                 | -323,931,721  | 5.00  |
| OTHER INCOME |                                                                           |               |       |
| 6.00         | Contributions, donations, bequests, etc                                   | 0             | 6.00  |
| 7.00         | Income from investments                                                   | 0             | 7.00  |
| 8.00         | Revenues from telephone and other miscellaneous communication services    | 0             | 8.00  |
| 9.00         | Revenue from television and radio service                                 | 0             | 9.00  |
| 10.00        | Purchase discounts                                                        | 0             | 10.00 |
| 11.00        | Rebates and refunds of expenses                                           | 0             | 11.00 |
| 12.00        | Parking lot receipts                                                      | 0             | 12.00 |
| 13.00        | Revenue from laundry and linen service                                    | 0             | 13.00 |
| 14.00        | Revenue from meals sold to employees and guests                           | 0             | 14.00 |
| 15.00        | Revenue from rental of living quarters                                    | 0             | 15.00 |
| 16.00        | Revenue from sale of medical and surgical supplies to other than patients | 0             | 16.00 |
| 17.00        | Revenue from sale of drugs to other than patients                         | 0             | 17.00 |
| 18.00        | Revenue from sale of medical records and abstracts                        | 0             | 18.00 |
| 19.00        | Tuition (fees, sale of textbooks, uniforms, etc.)                         | 78,129,280    | 19.00 |
| 20.00        | Revenue from gifts, flowers, coffee shops, and canteen                    | 0             | 20.00 |
| 21.00        | Rental of vending machines                                                | 0             | 21.00 |
| 22.00        | Rental of hospital space                                                  | 0             | 22.00 |
| 23.00        | Governmental appropriations                                               | 0             | 23.00 |
| 24.00        | RESEARCH AND OTHER                                                        | 135,302,159   | 24.00 |
| 24.01        | NON-OPERATING REVENUES                                                    | 29,417,473    | 24.01 |
| 24.02        | MEDICAID TAX REVENUE                                                      | 74,889,040    | 24.02 |
| 24.03        | OTHER OPERATING REVENUE                                                   | 74,174,305    | 24.03 |
| 25.00        | Total other income (sum of lines 6-24)                                    | 391,912,257   | 25.00 |
| 26.00        | Total (line 5 plus line 25)                                               | 67,980,536    | 26.00 |
| 27.00        | OTHER EXPENSES (SPECIFY)                                                  | 0             | 27.00 |
| 28.00        | Total other expenses (sum of line 27 and subscripts)                      | 0             | 28.00 |
| 29.00        | Net income (or loss) for the period (line 26 minus line 28)               | 67,980,536    | 29.00 |

| CALCULATION OF CAPITAL PAYMENT                      |                                                                                                                                                              | Provider CCN: 14-0119 | Period:<br>From 07/01/2018<br>To 06/30/2019 | Worksheet L<br>Parts I-III<br>Date/Time Prepared:<br>11/24/2019 4:22 pm |
|-----------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------|---------------------------------------------|-------------------------------------------------------------------------|
|                                                     |                                                                                                                                                              | Title XVIII           | Hospital                                    | PPS                                                                     |
|                                                     |                                                                                                                                                              |                       | Urban                                       | Rural                                                                   |
|                                                     |                                                                                                                                                              |                       | 1.00                                        | 1.01                                                                    |
| <b>PART I - FULLY PROSPECTIVE METHOD</b>            |                                                                                                                                                              |                       |                                             |                                                                         |
| <b>CAPITAL FEDERAL AMOUNT</b>                       |                                                                                                                                                              |                       |                                             |                                                                         |
| 1.00                                                | Capital DRG other than outlier                                                                                                                               |                       | 1                                           | 9,884,463                                                               |
| 1.01                                                | Model 4 BPCI Capital DRG other than outlier                                                                                                                  |                       | 0                                           | 0                                                                       |
| 2.00                                                | Capital DRG outlier payments                                                                                                                                 |                       | 373,813                                     |                                                                         |
| 2.01                                                | Model 4 BPCI Capital DRG outlier payments                                                                                                                    |                       | 0                                           |                                                                         |
| 3.00                                                | Total inpatient days divided by number of days in the cost reporting period (see instructions)                                                               |                       | 445.53                                      |                                                                         |
| 4.00                                                | Number of interns & residents (see instructions)                                                                                                             |                       | 518.83                                      |                                                                         |
| 5.00                                                | Indirect medical education percentage (see instructions)                                                                                                     |                       | 38.90                                       |                                                                         |
| 6.00                                                | Indirect medical education adjustment (multiply line 5 by the sum of lines 1 and 1.01, columns 1 and 1.01)(see instructions)                                 |                       | 3,845,056                                   |                                                                         |
| 7.00                                                | Percentage of SSI recipient patient days to Medicare Part A patient days (Worksheet E, part A line 30) (see instructions)                                    |                       | 8.10                                        |                                                                         |
| 8.00                                                | Percentage of Medicaid patient days to total days (see instructions)                                                                                         |                       | 31.54                                       |                                                                         |
| 9.00                                                | Sum of lines 7 and 8                                                                                                                                         |                       | 39.64                                       |                                                                         |
| 10.00                                               | Allowable disproportionate share percentage (see instructions)                                                                                               |                       | 8.36                                        |                                                                         |
| 11.00                                               | Disproportionate share adjustment (see instructions)                                                                                                         |                       | 0                                           |                                                                         |
| 12.00                                               | Total prospective capital payments (see instructions)                                                                                                        |                       | 14,103,333                                  |                                                                         |
|                                                     |                                                                                                                                                              |                       | 1.00                                        |                                                                         |
| <b>PART II - PAYMENT UNDER REASONABLE COST</b>      |                                                                                                                                                              |                       |                                             |                                                                         |
| 1.00                                                | Program inpatient routine capital cost (see instructions)                                                                                                    |                       | 0                                           | 1.00                                                                    |
| 2.00                                                | Program inpatient ancillary capital cost (see instructions)                                                                                                  |                       | 0                                           | 2.00                                                                    |
| 3.00                                                | Total inpatient program capital cost (line 1 plus line 2)                                                                                                    |                       | 0                                           | 3.00                                                                    |
| 4.00                                                | Capital cost payment factor (see instructions)                                                                                                               |                       | 0                                           | 4.00                                                                    |
| 5.00                                                | Total inpatient program capital cost (line 3 x line 4)                                                                                                       |                       | 0                                           | 5.00                                                                    |
|                                                     |                                                                                                                                                              |                       | 1.00                                        |                                                                         |
| <b>PART III - COMPUTATION OF EXCEPTION PAYMENTS</b> |                                                                                                                                                              |                       |                                             |                                                                         |
| 1.00                                                | Program inpatient capital costs (see instructions)                                                                                                           |                       | 0                                           | 1.00                                                                    |
| 2.00                                                | Program inpatient capital costs for extraordinary circumstances (see instructions)                                                                           |                       | 0                                           | 2.00                                                                    |
| 3.00                                                | Net program inpatient capital costs (line 1 minus line 2)                                                                                                    |                       | 0                                           | 3.00                                                                    |
| 4.00                                                | Applicable exception percentage (see instructions)                                                                                                           |                       | 0.00                                        | 4.00                                                                    |
| 5.00                                                | Capital cost for comparison to payments (line 3 x line 4)                                                                                                    |                       | 0                                           | 5.00                                                                    |
| 6.00                                                | Percentage adjustment for extraordinary circumstances (see instructions)                                                                                     |                       | 0.00                                        | 6.00                                                                    |
| 7.00                                                | Adjustment to capital minimum payment level for extraordinary circumstances (line 2 x line 6)                                                                |                       | 0                                           | 7.00                                                                    |
| 8.00                                                | Capital minimum payment level (line 5 plus line 7)                                                                                                           |                       | 0                                           | 8.00                                                                    |
| 9.00                                                | Current year capital payments (from Part I, line 12, as applicable)                                                                                          |                       | 0                                           | 9.00                                                                    |
| 10.00                                               | Current year comparison of capital minimum payment level to capital payments (line 8 less line 9)                                                            |                       | 0                                           | 10.00                                                                   |
| 11.00                                               | Carryover of accumulated capital minimum payment level over capital payment (from prior year Worksheet L, Part III, line 14)                                 |                       | 0                                           | 11.00                                                                   |
| 12.00                                               | Net comparison of capital minimum payment level to capital payments (line 10 plus line 11)                                                                   |                       | 0                                           | 12.00                                                                   |
| 13.00                                               | Current year exception payment (if line 12 is positive, enter the amount on this line)                                                                       |                       | 0                                           | 13.00                                                                   |
| 14.00                                               | Carryover of accumulated capital minimum payment level over capital payment for the following period (if line 12 is negative, enter the amount on this line) |                       | 0                                           | 14.00                                                                   |
| 15.00                                               | Current year allowable operating and capital payment (see instructions)                                                                                      |                       | 0                                           | 15.00                                                                   |
| 16.00                                               | Current year operating and capital costs (see instructions)                                                                                                  |                       | 0                                           | 16.00                                                                   |
| 17.00                                               | Current year exception offset amount (see instructions)                                                                                                      |                       | 0                                           | 17.00                                                                   |