

Section 1: Costs

	Hospital Name	ST. ANTHONY HOSPITAL				
	Hospital System	CATHOLIC HEALTH INITIATIVES				
	Reporting Period	07/01/19-06/30/20				
	Contact Information	Name of Person Completing This Form: Avril Nicholson			Title: Special Projects	
		Phone Number: [REDACTED]			Email: [REDACTED]	
		Reviewed By: Harold Geller			Title: Market President	
	Please indicate what type of cost accounting system is being used for this reporting. (Check all that apply and explain.)	Cost accounting system	Cost to Charge Ratio	Other (explain)		
			x			
	Community Benefit Categories	Column A	Column B	Column C	Column D	Column E
Row	Charity Care and Public Programs	Patient Visits	Total community benefit expense	Direct offsetting revenue	Net community benefit expense (B-C)	
1	Charity care at cost	1,922	\$1,011,311	\$0	\$1,011,311	
	Unreimbursed costs of public programs:					
2	Medicaid/Managed Medicaid Plans	-	\$0	\$0	\$0	
3	Medicare/Managed Medicare Plans	-	\$0	\$0	\$0	
4	Other public programs	-	\$0	\$0	\$0	
5	Charity Care and Public Programs Total (sum of lines 1 through 4)	1,922	\$1,011,311	\$0	\$1,011,311	
6	What percentage of Charity Care dollars granted represented a discount of 100% of charges?	100.0%				
	Other Benefits	Encounters	Total community benefit expense	Direct offsetting revenue	Net community benefit expense (B-C)	Description of Activities
7	Community health improvement services	10,555	\$667,715	\$3,453	\$664,262	
8	Research	-	\$0	\$0	\$0	
9	Health professions education	92	\$97,510	\$0	\$97,510	
10	Subsidized health services	-	\$0	\$0	\$0	
11	Cash and in-kind contributions to other community groups	11,325	\$335,267	\$0	\$335,267	
12	Community building activities	17,994	\$197,722	\$0	\$197,722	
13	Community benefit operations	165	\$30,668	\$0	\$30,668	
14	Other Benefits Totals (sum of lines 7 through 13)	40,131	\$1,328,882	\$3,453	\$1,325,429	
15	Community Benefits Totals (line 5 plus line 14)	42,053	\$2,340,193	\$3,453	\$2,336,740	