

Section 1: Costs **Fiscal Year: 2021**

Hospital Name:	Asante Three Rivers Medical Center			
Hospital System:	Asante Health System			
Reporting Period:	10/1/20-9/30/21			
Contact Information:	Name of Person Completing This Form:	Karin Lilya	Title:	Supervisor of Accounting
	Phone Number:		Email:	
	Reviewed By:	-	Title:	0

Line	Type of accounting system used for this reporting	Charity Care Costs	Patient Visits	Total community benefit expense	Direct offsetting revenue	Net community benefit expense
1	Cost to Charge Ratio	Medicaid Charity Care	-	\$0	\$0	\$0
2		Medicare Charity Care	-	\$0	\$0	\$0
3	Percentage of Charity Care at 100% #DIV/0!	Commercial Charity Care	-	\$0	\$0	\$0
4		Self Pay Charity Care	-	\$0	\$0	\$0
5		Other Payor Charity Care	-	\$2,196,307	\$0	\$2,196,307
6		Total Charity Care	0	\$2,196,307	\$0	\$2,196,307

Line	Type of accounting system used for this reporting	Unreimbursed Costs of Public Programs:	Patient Visits	Total community benefit expense	Direct offsetting revenue	Net community benefit expense
7	Cost to Charge Ratio	Medicaid/Managed Medicaid	-	\$61,698,837	\$41,674,635	\$20,024,202
8		Other public programs	-	\$13,621,240	\$10,544,700	\$3,076,540
9		Public Programs Total	-	\$75,320,077	\$52,219,335	\$23,100,741
10		Total Unreimbursed Care	-	\$77,516,383	\$52,219,335	\$25,297,048

Line	Other Community Benefits	Encounters	Total community benefit expense	Direct offsetting revenue	Net community benefit expense (B-C)
11	Community health improvement services		\$1,812,758	\$136,592	\$1,676,166
12	Research		\$0	\$0	\$0
13	Health professions education		\$417,874	\$0	\$417,874
14	Subsidized health services	-	\$7,855,406	\$5,476,538	\$2,378,868
15	Cash and in-kind contributions to other community groups		\$189,122	\$2,790	\$186,332
16	Community building activities		\$0	\$0	\$0
17	Community benefit operations		\$635,774	\$0	\$635,774
18	Other Community Benefits Total	0	\$10,910,934	\$5,615,920	\$5,295,014
19	Community Benefits Totals	0	\$88,427,317	\$57,835,255	\$30,592,062