



PUBLIC NOTICE

Finance and Management Committee

Thursday, September 26, 2013

7:30 a.m. – 9:00 a.m.

Location: Alameda Hospital (**Conference Room C**)

PLEASE NOTE CHANGE IN MEETING ROOM LOCATION AND DATE

2070 Clinton Avenue, Alameda, CA 94501

Office of the Clerk: (510) 814-4001

Members of the public who wish to comment on agenda items will be given an opportunity before or during the consideration of each agenda item. Those wishing to comment must complete a speaker card indicating the agenda item that they wish to address.

This is being noticed as a Board Meeting as a quorum of Directors may be present. Ex-officio members and non-committee members cannot vote on any item, whether or not a quorum of the Board is present.

- I. Call To Order Robert Deutsch, MD

- II. Action Items
 - A. Acceptance of August 28, 2013 Minutes Robert Deutsch, MD
[enclosure]
 - B. Recommendation to Accept August 2013 Unaudited Financial Statements Kerry Easthope
[enclosure]

- III. Chief Financial Officer Report Kerry Easthope
 - A. FYE June 30, 2013 Audit Update
 - B. NDPH IGT Supplemental Payment Program
 - C. Cash Flow Update

- IV. Chief Executive Officer Report Deborah E. Stebbins
 - A. Affiliation Updates
 - B. State Legislative Updates

- V. Board / Committee / Staff Comments

- VI. Adjournment

NEXT MEETING: Thursday, October 31, 2013



Finance and Management Committee Minutes

August 28, 2013

Members Present: (Voting)	Robert Deutsch, MD Lynn Bratchett, RN	Ann Evans Ed Kofman	Emmons Collins, MD William Sellman, MD
Management Present:	Deborah E. Stebbins Kerry J. Easthope	Mary Bond, RN Karen Taylor, RN	Richard Espinoza Katy Silverman
Ex Officio/Guests:	Michael McCormick, Jordan Battani		
Absent:			
Submitted by:	Kristen Thorson, District Clerk		

TOPIC	DISCUSSION	ACTION FOLLOW-UP
I. Call to Order	Director Deutsch called the meeting to order at 7:36 a.m.	
II. Action Items	A. Acceptance of the July 31, 2013 Minutes	Ms. Evans made a motion to accept the minutes. Dr. Collins seconded the motion. The motion carried.
	B. Recommendation to Accept the July 2013 Unaudited Financial Statements Mr. Easthope reviewed a PowerPoint Presentation on the June Financial Statements that corresponded with the Financial Statements included in the meeting packet. He noted the following key areas: <ul style="list-style-type: none"> • July Performance Overview • July Year End Adjustments • Key Volume Indicators • Case Mix Comparison • Statement of Operations • Net Revenues • Total Operating Expenses • Balance Sheet Changes • Financial Ratios July had a consolidated net operating loss of \$384,000 vs. a budgeted loss of	Ms. Evans made a motion to recommend to the Board of Directors acceptance of the July 2013 Unaudited Financial Statements. Mr. Kofman seconded the motion. The motion carried.

	<p>\$301,000. Total patient days were 55 (0.9%) greater than budget. CMI in July was 1.32 and Medicare CMI was 1.35. Total outpatient registrations were above budget by 172 registrations. Orthopedic Clinic volumes consistent with June at 260 visits versus budget of 302. Total net operating revenue was \$189,000 (3.0%) lower than budget and total operating expenses were \$124,000 under budget.</p> <p>Director Deutsch requested the 1206(b) clinic volumes and stats be added to the presentation.</p> <p>There was detailed discussion on labor costs and operating expenses for the month. Mr. Easthope noted that the new slide in the presentation that identifies key trends in PTO accrual, overtime and doubletime on a month to month basis and that also compares these metrics to the monthly average for Jan –June 2013.</p> <p>Copies of the presentation are available through Administration.</p>	
<p>III. Chief Financial Officers Report</p>	<p>A. Core Staffing / Reduction of Premium Time</p> <p>Ms. Bond reviewed graphs outlining the overtime and double time expenses for the nursing unit as there has been concerted effort to reduce the premium pay in nursing through a variety of tactics. Another graph with agency use was also presented. Both graphs identified a downward trend in use of premium pay. Ms. Bond also reviewed the nursing action steps / tactics being implemented at the Hospital.</p> <p>Mr. Easthope reviewed an accounts payable aging report as follow-up to a request by several Board members. The list identified the top 15 vendors that were owed the most by the Hospital.</p> <p>Mr. Easthope reviewed a six month cash flow projection based on the FY 2014 budget noting that in October and November estimated cash balance will go negative. Ms. Stebbins and Mr. Easthope stated that they have presented this cash flow to Alameda Health System and have requested assistance even if the Definitive agreement I not signed by the end of September. If funding from AHS is not provided, Mr. Easthope stated that capital projects may be delayed in order to help with cash flow.</p>	<p>No action taken.</p>
<p>IV. Chief Executive Officers Report</p>	<p>A. Affiliation Updates</p> <p>Ms. Stebbins updated the committee on the affiliation noting that there has been a delay in the planning process by AHS due to the transaction with San</p>	<p>No action taken.</p>

	<p>Leandro Hospital. In the mean time, Alameda Hospital and AHS are working together to bring volume over as early as the beginning October. Dr. Collins asked about extending the budget beyond December 31, 2013 due to delays in transition of the affiliation. Mr. Easthope replied that depending on the status of the affiliation, extending the budget and for how long would need to be discussed.</p>	
V. Public Comments	No comments.	
VI. Board / Committee / Staff Comments	No comments.	
VII. Adjournment	Being no further business, the meeting was adjourned at 9:23 a.m.	

DRAFT

THE CITY OF ALAMEDA HEALTH CARE DISTRICT

ALAMEDA HOSPITAL

UNAUDITED FINANCIAL STATEMENTS

FOR THE PERIOD ENDING August 31, 2013

**CITY OF ALAMEDA HEALTH CARE DISTRICT
ALAMEDA HOSPITAL
AUGUST 31, 2013**

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ALAMEDA HOSPITAL MANAGEMENT DISCUSSION AND ANALYSIS AUGUST, 2013

The management of Alameda Hospital (the "Hospital") has prepared this discussion and analysis in order to provide an overview of the Hospital's performance for the period ending August 31, 2013 in accordance with the Governmental Accounting Standards Board Statement No. 34, *Basic Financials Statements; Management's Discussion and Analysis for State and Local Governments*. The intent of this document is to provide additional information on the Hospital's financial performance as a whole.

Highlights

Overall for the month of August, the second month of fiscal 2014, the hospital experienced a combined net operating loss of \$399,000 against a budgeted loss of \$121,000. This loss is driven again by the lower acute census so it is encouraging to see the acute census has climbed back up in September. Waters Edge had a positive net contribution of \$138,000 this month.

August discharges were 215, which was 46 or 17.5% below budget, and total patient days were 6,066 or 49 (0.8%)% greater than budget. With the lower discharges and higher patient days, the acute ALOS increased from prior 3.6 in the prior month to 4.03 in the current month. Total patient days for inpatient acute services were again down 14.1%; subacute days were up 4.6%, skilled nursing days were up at South Shore by 1.9% and Waters Edge were up by 3.7%.

Overall outpatient activity was mixed again this month. Outpatient registrations were down 10.5% ,Emergency Room visits were 226 or 15.0% below budget. Outpatient surgeries were below budget for the month by 23 or 16.1%.

The Wound Care program had 459 visits in August compared to a budget of 350, or 31.1% above budget. In August there were 78 HBO treatments compared to 84 in July.

Total gross and net revenue in August was consistent with activity. The overall inpatient component was below budget by 4.4% (driven again by the lower acute census) and outpatient was below budget 7.8% (driven by lower outpatient and emergency room registrations).

The overall Case Mix Index (CMI) in August was 1.2611, below the prior month and also below the FY 2014 average of 1.2936. Total expenses were just over \$7.0 million in August, which is \$230,000 or 3.2% below budget.

Rents and leases were over budget while salaries, temporary agency, benefits, professional fees, supplies and purchased services were under budget. All other categories were close to budget. Please see the Expense section for further explanation of the expense variances.

Cash and cash equivalents were \$5.2 million at the end of August, down from prior month due to the timing of three payrolls hitting in August. Cash collections in August were lower than the previous month high but still strong at just over \$6 million, consistent with recent net revenue numbers.

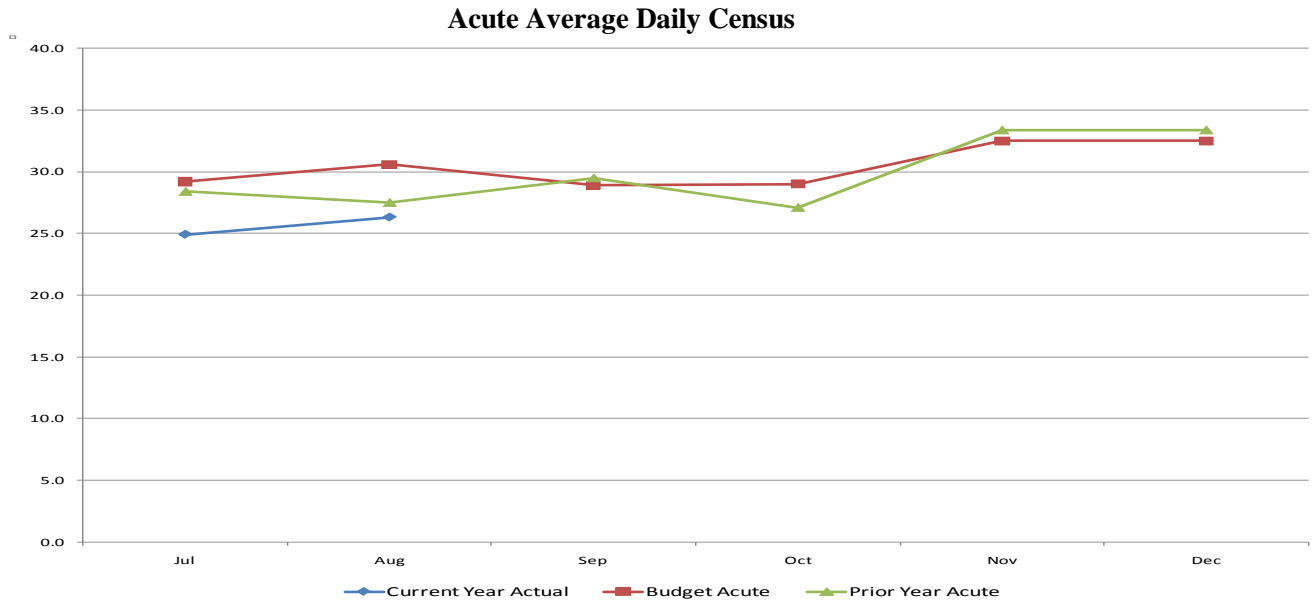
Lastly, the current ratio dipped to .86 below the required 1.0 of our bank covenants. Net Assets also dropped slightly to almost \$4.0 million.

ACTIVITY

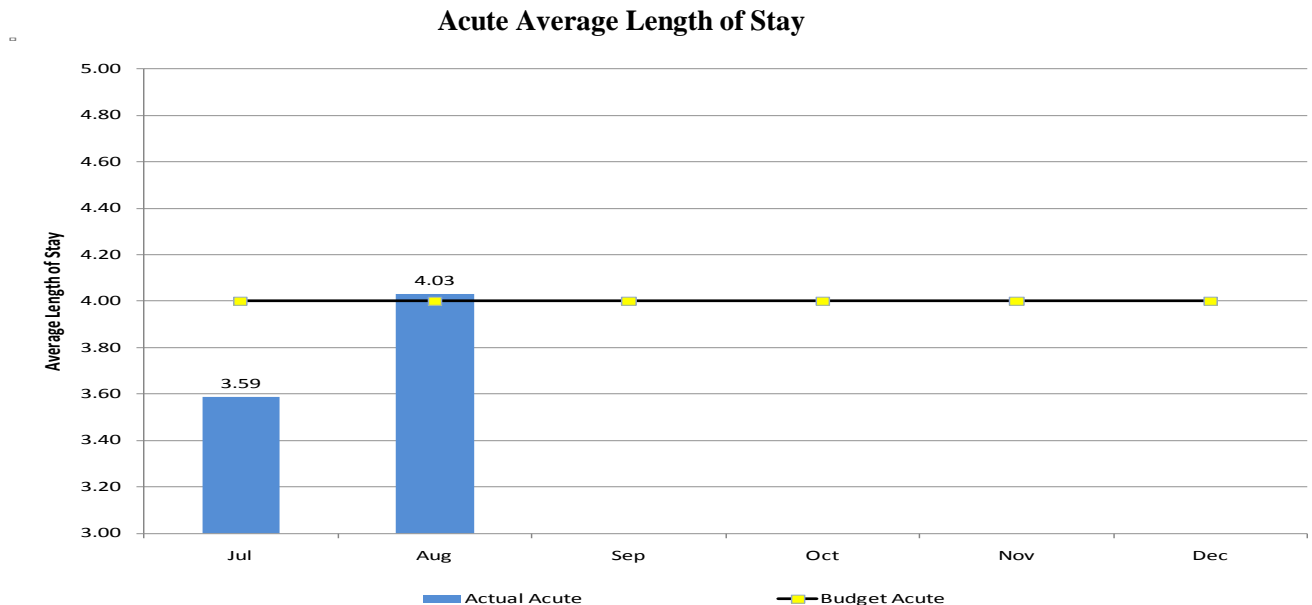
ACUTE, SUBACUTE AND SNF SERVICES

Overall, patient days were 0.8% above budget for the month and above August of last year. This month's acute days were below budget by 14.1%, Subacute was up 4.6%, South Shore was up 1.9% and Waters Edge was up 3.7%.

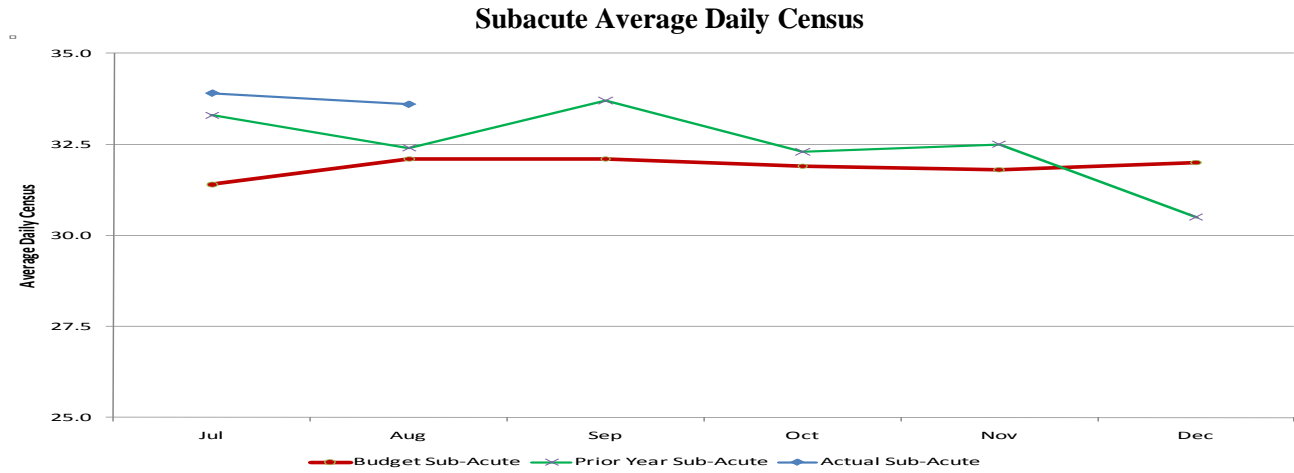
August's acute patient days were again 134 days or 14.1% lower than budget for the month and 4.6% lower than August 2012. Contributing to the lower acute census was that 3 West (our Med/Surg unit) was closed for 11 days during August. The acute care program is comprised of the Critical Care Unit (3.8 ADC, 12.0% below budget), Telemetry / Definitive Observation Unit (14.1 ADC, 17.4% above budget) and Med/Surg Unit (8.4 ADC, 14.1% below budget).



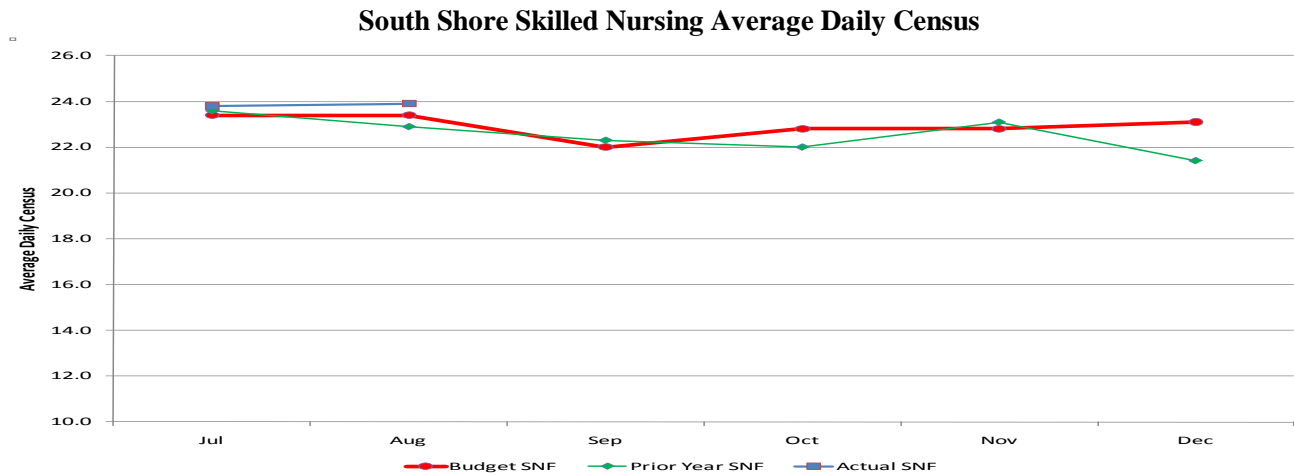
The acute Average Length of Stay (ALOS) increased from 3.59 in July to 4.03 in August and is just above the budget of 4.00. The graph below shows the ALOS by month compared to the budget.



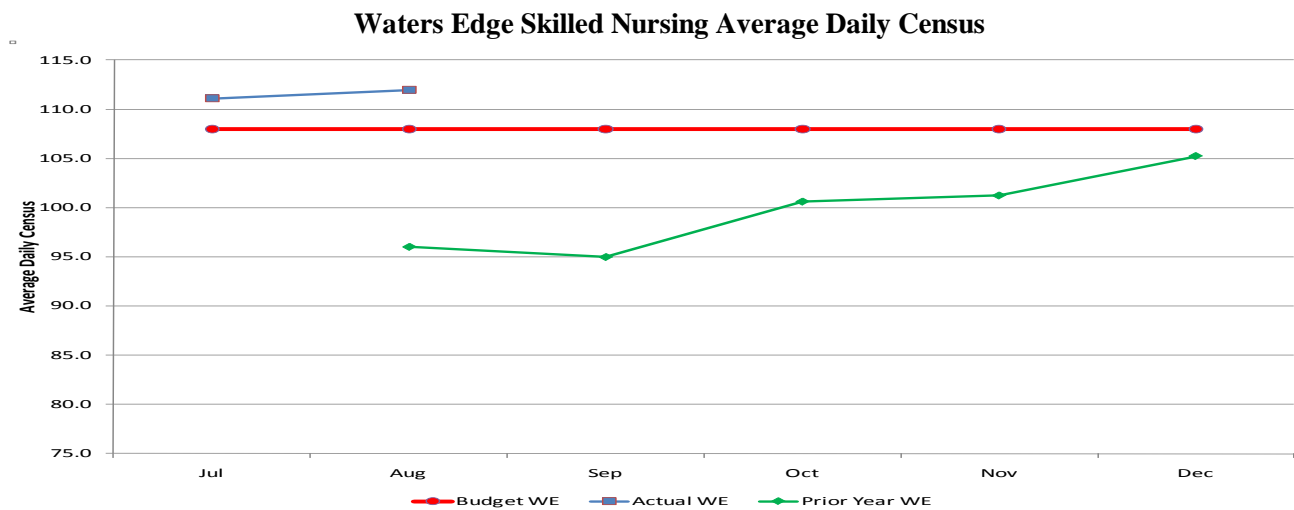
The Subacute program ADC of 33.6 was above the budget by 1.48 ADC or 4.6%. The census has stabilized as the construction moves are complete. The graph below shows the Subacute ADC for the current fiscal year as compared to budget and the prior year.



The South Shore ADC was above budget again by 14 patient days (1.9%) for the month of August. The graph below shows the South Shore monthly ADC as compared to budget and the prior year. In August the number of Medicare A skilled patients was 2.77 ADC, below the 4.4 ADC in July and below the budget of 4.1.



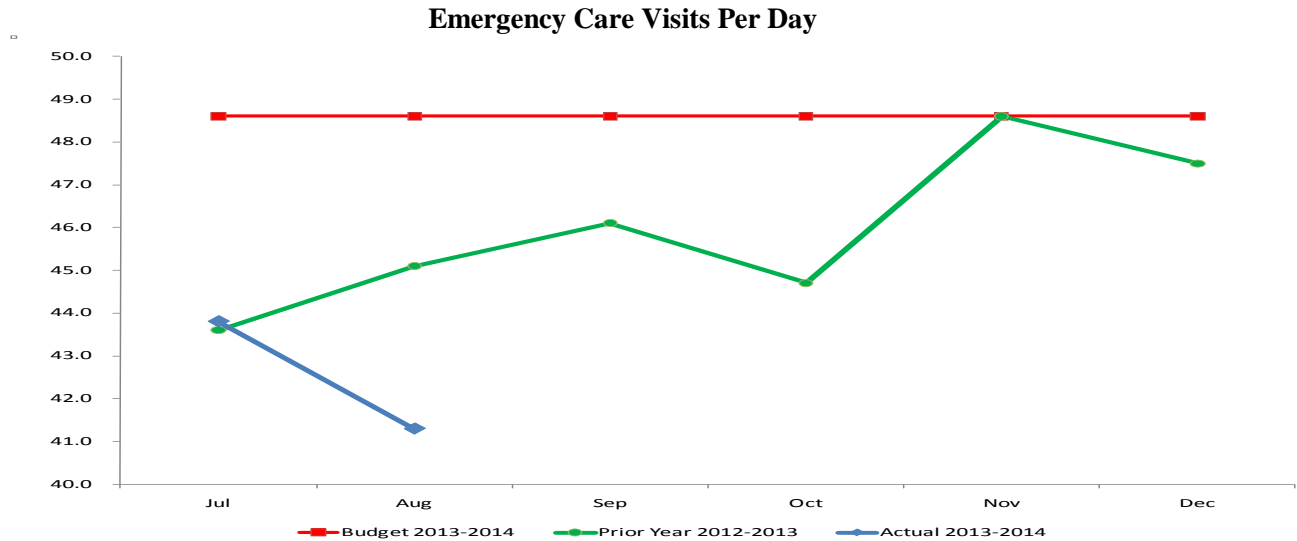
Waters Edge census was 111.97 ADC or 3.7% above the budget of 108.0 in August. The Medicare census was 12.13 ADC even with the 12.1 ADC in the prior month, but below the Medicare ADC budget of 16.2.



ANCILLARY SERVICES

Outpatient Services

Emergency Care Center (ECC) visits in August were 1,281, or 226 visits (15.0%) below the budget of 1,507. The inpatient admission rate from the ECC was 17.6% above the 16.6% admit rate in July. On a per day basis, the total visits represent a decrease of 5.7% from the prior month daily average. In August, there were 279 ambulance arrivals versus 266 in the prior month. Of the 279 ambulance arrivals in the current month, 198 or 70.9% were from Alameda Fire Department (AFD).

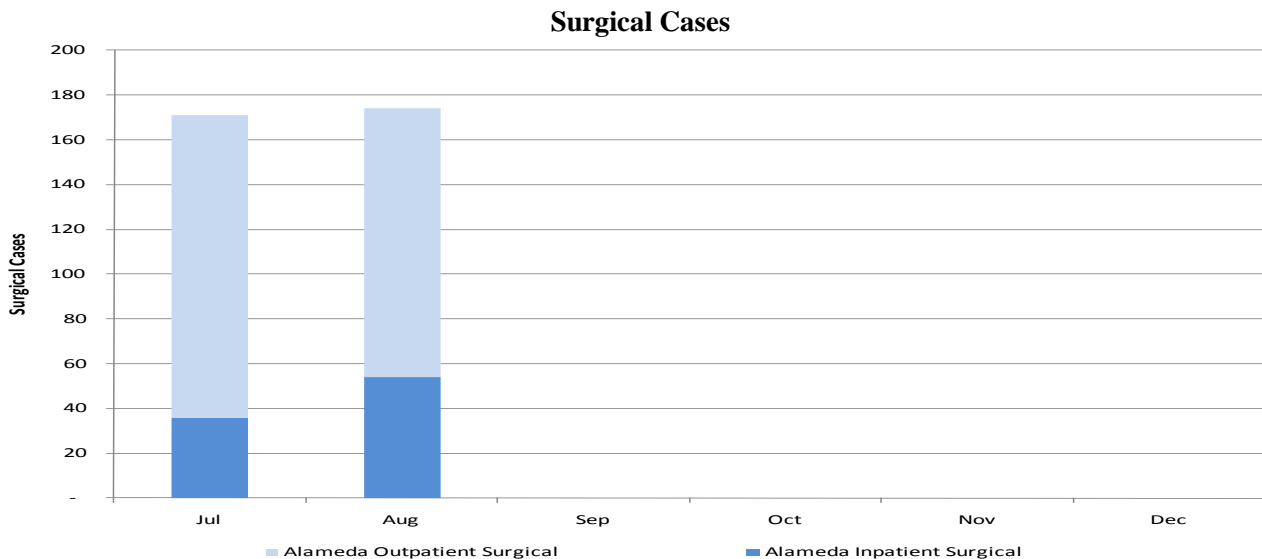


Outpatient registrations totaled 1,990 or 10.5% below the budget. This month the number of patient visits were down in Radiology (93), Laboratory (98), IV Therapy (39) and Physical Therapy (24). However, visits were up in EKG (12), MRI (12), and Occupational Therapy (9). In August there were 153 Therapy visits and 120 Imaging procedures from the new orthopedic clinic, compared to 230 and 128 respectively in July.

In August, Wound Care was above the budget of 350 with 459 visits, or 31.1% over budget. Hyperbaric Oxygen treatments accounted for 78 of those visits, compared to 84 in July.

Surgery

The total number of surgery cases in August were 174 or 11.7% below the budget of 197 and just below last year's case volume of 180. Inpatient cases of 54 right at budget and outpatient was below budget by 23 (16.1%) at 120 cases. Lower outpatient cases were attributed to less minor room procedures, specifically YAG laser cases.



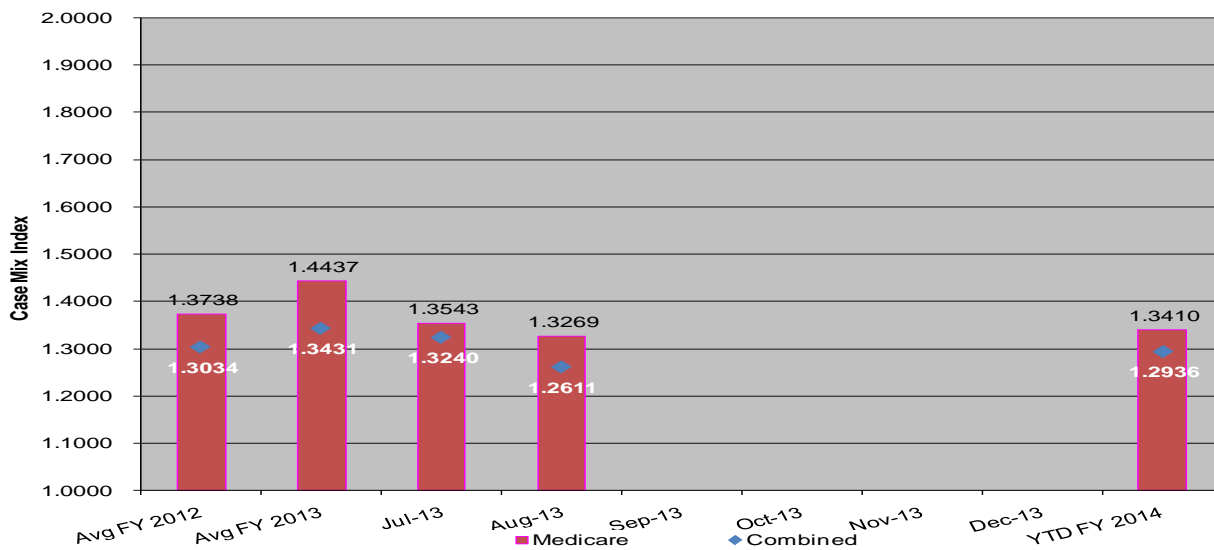
Payer Mix

The Hospital's overall payer mix compared to budget is illustrated below. This is inclusive of the Waters Edge revenue.

	<u>Aug Actual</u>	<u>Aug Budget</u>
Medicare	49.7%	47.2%
Medi-Cal	29.9%	27.1%
Managed Care	13.5%	16.5%
Other	3.6%	2.9%
Commerical	0.9%	1.3%
Self-Pay	2.4%	5.0%
Total	100.0%	100.0%

Case Mix Index

The Hospital's overall Case Mix Index (CMI) for August was 1.2611, down from the prior month of 1.3240 (4.75%). The Medicare CMI was 1.3269 in August, just below the prior month of 1.3543 (2.02%). The graph below shows the Medicare CMI for the Hospital during the current fiscal year as compared to the prior two years.



Revenue

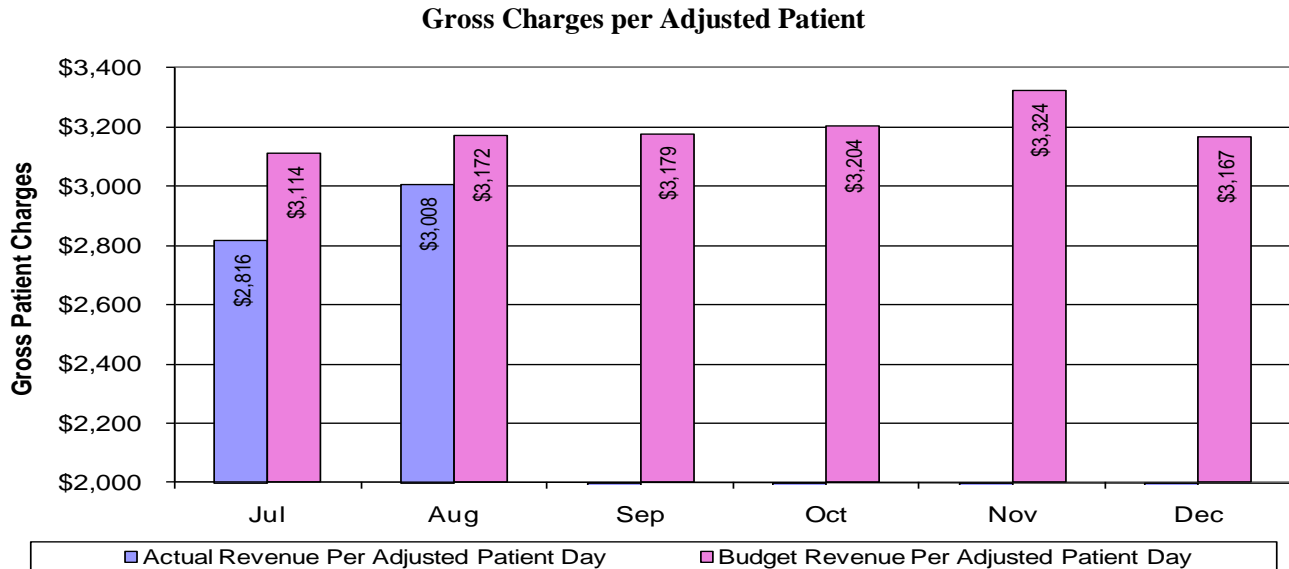
Gross patient charges in August were below budget by more than \$1.5 million or 5.5%. Inpatient gross revenues were almost \$850,000 below budget and outpatient gross revenues were down almost \$700,000. Acute inpatient days were 134 (14.1%) below budget and acute gross revenue was also down 12.5%. Inpatient ancillary service charges were below budget in Laboratory, Pharmacy, Respiratory Therapy and Emergency.

Waters Edge gross and net revenue were above budget in August consistent with the volume. The ancillary revenue was above budget 37.1% (again mostly due to therapy services) and the routine daily room and board revenue was above budget by 5.9%.

Outpatient gross revenues were lower than budget by almost \$700,000 (7.8%). Emergency, Laboratory, Imaging and Pharmacy were the largest contributors to this being below budget while the Wound Care and Rehab were above budget.

Wound Care volume was above budget 31.1% and the gross revenue was above budget by \$285,000, resulting in Net Revenue coming in \$58,000 above budget for the month. The higher volume has continued in August after the unusual low volume seen back in June.

On an adjusted patient day basis, total patient revenue was \$3,008 below the budget of \$3,172 for the month of August. The table below shows the Hospital's monthly gross revenue per adjusted patient day by month and year-to-date for Fiscal Year 2014 compared to budget.



Contractual Allowances and Net Revenue

Contractual allowances are computed as deductions from gross patient revenues based on the difference between gross patient charges and the contractually agreed upon rates of reimbursement with third party government-based programs such as Medicare, Medi-Cal and other third party payers such as Blue Cross. A Net Revenue percentage of 23.2% was budgeted and 22.7% was realized. Medi-Cal reimbursement at both South Shore and Waters Edge were calculated at a per diem rate of \$316 which is consistent with budget and AB97 rate reduction.

Overall, Net Revenue was just over \$6.1 million, \$487,000 below the budget of \$6.6 million. The lower than budgeted inpatient acute census, and lower emergency, outpatient surgery, and radiology visits are key drivers to the lower Net Revenue. Beginning April 1, 2013, the Federal budget sequestration goes into effect. This is a 2% reduction in all Medicare reimbursements which equate to about \$40,000 per month for Alameda Hospital.

Waters Edge had Net Revenues of \$1.34 million, above the budget by \$110,000 or 8.9%. Although census was higher than budgeted overall census, we had less of the higher payer Medicare patients and more of the lower payer Medi-Cal patients driving this negative variance. Waters Edge net revenue was about \$50,000 better in August as a couple of older accounts pending medi-cal coverage were approved and paid. We had a contingency reserve on these accounts until eligibility was finalized.

Expenses

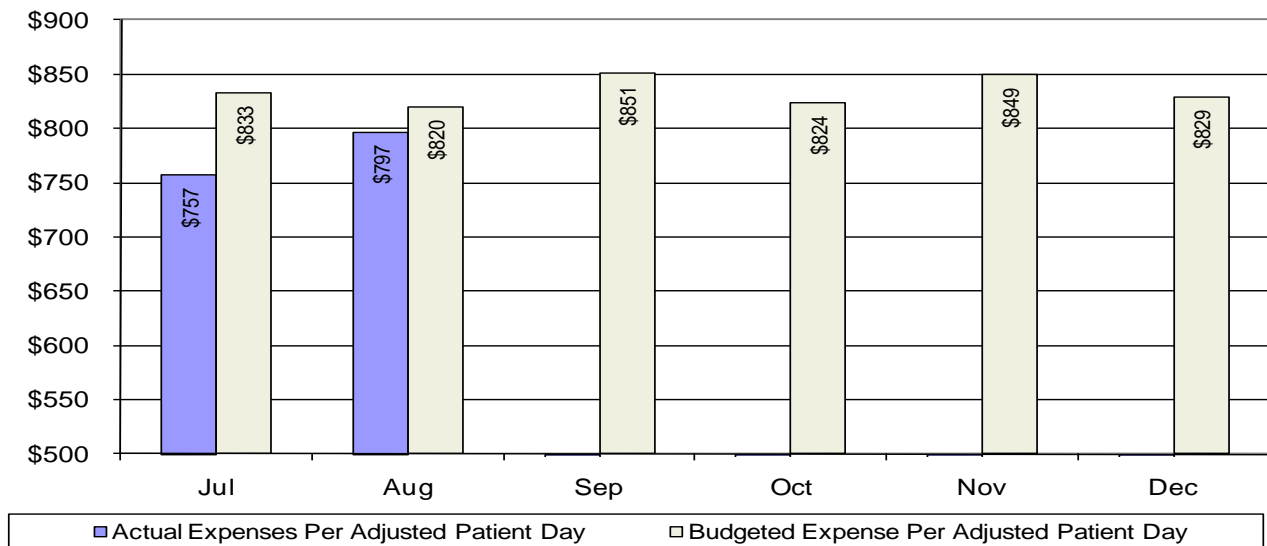
Total Operating Expenses

Total operating expenses were \$7.0 million which was lower than the fixed budget by \$231,000 or 3.2%. This is a welcome change from the prior year negative expense variances. Expenses are lower to a great extent because of the lower acute census in August.

Rents and leases were above budget while salaries, temporary agency, benefits, professional fees, supplies and purchased were under budget. All other expense categories were reasonably close to budget.

The graph on the below shows the actual Hospital operating expenses on an adjusted patient day basis for the fiscal year by month as compared to budget.

Expenses per Adjusted Patient Day



The following are explanations of the significant areas of variance that were experienced in the current month.

Salary and Temporary Agency Expenses

Salary and temporary agency costs combined were favorable to the fixed budget by \$49,000 (1.18%). Total salaries are below budget \$35,000 while Registry (temporary agency services) is below budget \$14,000.

The \$35,000 favorable salary expense variance is comprised of productive salaries being \$138,000 (4.5%) below budget while non-productive salaries were \$108,000 over budget.

Although productive salaries were below budget in most acute nursing units, salaries were higher in subacute, southshore, wound care, all due to higher patient activity in these areas.

Non-productive being over budget is off-set, in part, by benefits expense being \$83,000, most of this coming from reduction in PTO / Vacation accrual as employees continue to take time off. The expense benefit comes from those positions that do not need to be replaced when off e.g. administration. In addition, non-productive was high due to two employee termination settlements totaling \$19,000, new hire employee orientations in the Emergency department, PCS training in DOU & CCU, and HIPAA and MAT training on the acute nursing units contributed to additional non-productive salary expense.

The use of overtime and double time premium pay has dropped by approximately \$90,000 from the prior six month average as we strive to get better control of this expensive component of the total salaries. There were some overtime incurred with the above mentioned PCS training as well as premium pay needed to cover sick calls and break coverage on some weekend shifts. The productive salaries per adjusted patient day (APD) were \$335 compared to a budget of \$350. Total salaries per APD were \$400 compared to a budget of \$403 per APD.

Registry expense was lower mainly due to the acute units using less staff due to the lower census, as well as lower in the Laboratory.

While the overall temporary agency expense was below budget there were a few departments utilizing temporary staff higher than budgeted such as Rehab and Waters Edge.

Benefits

Benefits were below the fixed budget by \$83,000. While these numbers fluctuate from month to month, benefits are down this month due higher usage of PTO/Vacation accrual. We have been encouraging employees to use their PTO/Vacation time which thus reduces the amount of accrual needed. Accrual for PTO / Vacation was \$70,000 under budget in August, and is a direct offset to the higher non-productive wages discussed above. Overall, health claim expense was about \$20,000 below budget, unemployment insurance \$10,000 and FICA taxes \$5,000. Although we did have a very large claim processed in August, it will be covered under our health insurance stop loss coverage and will not have an effect on benefit expense. Offsetting the higher PTO/Vacation accrual is the pension expense that was under budgeted about \$20,000 per month.

Professional Fees

Professional fees were just under budget by \$10,000 or 2.0%. While Pharmacy increased use of Night Hawk pharmacy service and Wound Care Clinic management fees (due to volume) were above budget, Administration was under budget resulting in a positive variance overall. The 1206 b clinic was over budget almost \$6,800 due to prior month missed an accruals for the Neurology clinic.

Supplies

Supplies expense were \$72,000 under budget. This variance is primarily due to Medical Supplies, but there are smaller variances under budget in many departments, including acute nursing and long term care as well as surgery, respiratory therapy and environmental services. Lower outpatient surgery, emergency room visits, and acute census all attribute to the lower supply utilization. Wound care supplies were higher than budget as was patient visits in the clinic. Many of wound cares supply expenses are reimbursable and reflected in net revenue estimations. Lower

Purchased Services

Purchased services were below budget for the month of August by \$29,000 or 5.0%. While there were some departments higher than budget such as Waters Edge and the Clinics, there were several departments under budget such as Accounting, Environmental Services, Engineering and Community Relations resulting in the overall variance being positive to budget.

Rents and Leases

Rents and lease expense was \$19,000 over budget in the month. While Respiratory Therapy and Engineering were below budget this month, Central Supply and Administration were over budget. We continue to have higher equipment rental expense, primarily for bed/mattress rentals. We are obtaining quotes to purchase the needed mattresses vs. continuing to rent. In addition, the annual rent increase for the south shore building was about \$2,500 per month higher than budgeted (taxes and fees assessments) and Waters Edge rent has increased \$2,800 per month as well.

Other Operating Expense

Other Operating Expenses were over budget this month by \$4,000. This variance is due mostly to the signing bonus for the new surgeon (that was budgeted evenly but expensed in August) plus higher license and tax expenses (annual expenses hitting in the month for Imaging DHCS equipment license fees, QRM Interqual fees and Laboratory CLIA license fees) offset by lower dues and subscription expenses.

Depreciation Expense

Depreciation Expenses was \$5,000 over budget. We are reviewing the detailed accounts to see why there is a difference between what we are recording monthly and have budgeted and should be able to clarify this difference in September.

Non-Operating Income / (Expense):

Other Income was \$22,000 under budget. We had assumed in the budget a contribution from the Foundation during this six month budget period of \$150,000. We have not recorded a portion of the receivable for this but will do so once a contribution is made later in the year. In addition, Parcel tax accrual has been recorded at about \$10,000 under budget in July and August. We will catch this accrual up in September as the budget for parcel tax is in line with what was actually received in fiscal year 2013, including the final tail payment received in late August.

Balance Sheet

Total assets decreased by almost \$1.3 million from the prior month. The following items make up the decrease in assets:

- Total unrestricted cash and cash equivalents for August decreased by approximately \$1.2 million and days cash on hand including restricted use funds also decreased to 23.7 days cash on hand in August from the 30.0 days cash on hand in July. Patient collections in August averaged just over \$193,000 per day, lower than the prior month but still strong. It is important to note that of the 5.2 million in Cash, we are holding \$2.3 million for LTC medical overpayment for the period August 2012 – April 2013. The state has begun recoupment of this money the week of September 16th.
- Net patient accounts receivable was \$10.8 million, down about \$100,000 from \$10.9 million at the end of July.
- Days in outstanding receivables were back down to 55.9 at August month end, a slight decrease from the July number of 56.5 days. Cash collections in August were \$6.0 million compared to \$7.2 million in July.

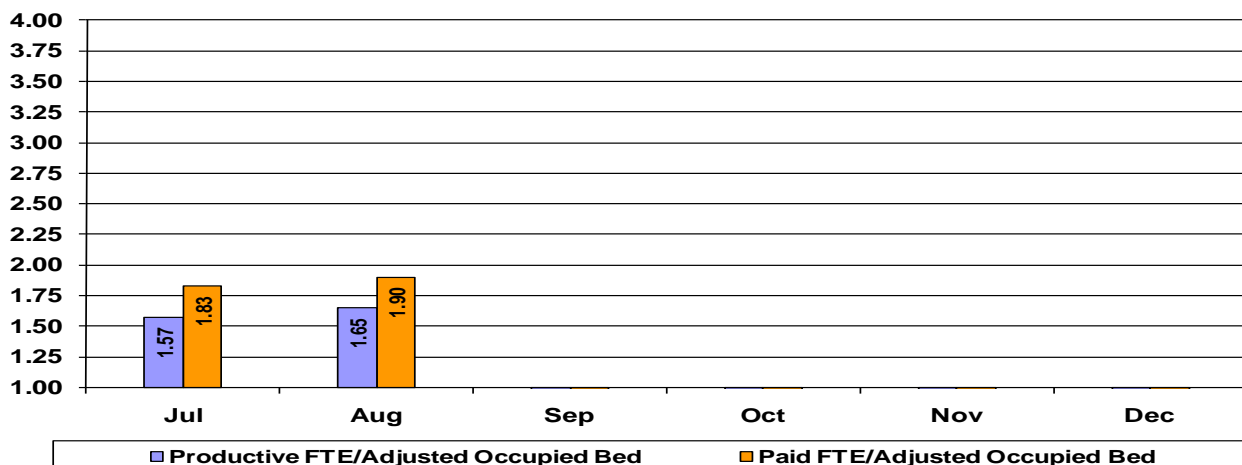
Overall, total liabilities decreased by \$880,000 from the prior month:

- Accounts payable increased almost \$500,000 in August to approximately \$11.6 million which equates to 159 AP Days, up from the 151 days in July.
- Payroll related accruals decreased over \$800,000 due to the timing the the pay periods in the month.
- Deferred revenues decreased by \$472,000 due to the recognition of one-twelfth of the 2013/2014 parcel tax revenues, which will be realized over the course of the fiscal year.
- Current Portion of Long Term Debt in the month of August remained consistent with prior month.
- Third Party Payer Settlement also remained fairly consistent with prior month as well.

Key Statistics

FTE's Per Adjusted Occupied Bed

For the month of August Productive FTE's per Adjusted Occupied Bed were 1.65, below the budget of 1.70 FTE's by 3.1%. Paid FTE's per Adjusted Occupied Bed were 1.90 or 1.7% below the budget. The graph below shows the productive and paid FTE's per Adjusted Occupied Bed for FY 2014 by month.



Current Ratio

The current ratio for August dropped slightly to 0.86. We have received a waiver to the 1.0 loan covenant from the Bank of Alameda through the quarter ending September 30, 2013.

A/R days

Net days in accounts receivable (A/R) are currently at 55.9. This is again down from the prior month of 56.5. Net A/R days are down due to the higher cash collections as Medi-Cal payments have increased to normal levels in July.

Days Cash on Hand

Days cash on hand for July were 23.7, a decrease from prior month of 30.0. The decrease is primarily due to the timing of three payrolls in August.

The following pages include the detailed financial statements for the two (2) months ended August 31, 2013, of Fiscal Year 2014.

**ALAMEDA HOSPITAL
KEY STATISTICS
AUGUST 2013**

	<u>ACTUAL AUGUST 2013</u>	<u>CURRENT FIXED BUDGET</u>	<u>VARIANCE (UNDER) OVER</u>	<u>%</u>	<u>AUGUST 2012</u>	<u>YTD AUGUST 2013</u>	<u>YTD FIXED BUDGET</u>	<u>VARIANCE</u>	<u>%</u>	<u>YTD AUGUST 2012</u>
Discharges:										
Total Acute	202	237	(35)	-14.8%	214	417	463	(46)	-10.0%	439
Total Sub-Acute	1	3	(2)	-66.7%	2	2	6	(4)	-66.7%	4
Total South Shore	3	6	(3)	-50.0%	5	7	12	(5)	-41.7%	7
Total Waters Edge	9	15	(6)	-40.0%	10	21	30	(9)	-30.0%	10
	<u>215</u>	<u>261</u>	<u>(46)</u>	<u>-17.6%</u>	<u>231</u>	<u>447</u>	<u>511</u>	<u>(64)</u>	<u>-12.6%</u>	<u>460</u>
Patient Days:										
Total Acute	814	948	(134)	-14.1%	853	1,585	1,853	(268)	-14.5%	1,734
Total Sub-Acute	1,041	995	46	4.6%	1,003	2,092	1,967	125	6.4%	2,035
Total South Shore	740	726	14	1.9%	709	1,478	1,450	28	1.9%	1,440
Total Waters Edge	3,471	3,348	123	3.7%	2,977	6,915	6,696	219	3.3%	2,977
	<u>6,066</u>	<u>6,017</u>	<u>49</u>	<u>0.8%</u>	<u>5,542</u>	<u>12,070</u>	<u>11,966</u>	<u>104</u>	<u>0.9%</u>	<u>8,186</u>
Average Length of Stay										
Total Acute	4.03	4.00	0.03	0.7%	3.99	3.80	4.00	(0.20)	-5.0%	3.95
Average Daily Census										
Total Acute	26.26	30.58	(4.32)	-14.1%	27.52	25.56	29.89	(4.32)	-14.5%	27.97
Total Sub-Acute	33.58	32.10	1.48	4.6%	32.35	33.74	31.73	2.02	6.4%	32.82
Total South Shore	23.87	23.42	0.45	1.9%	22.87	23.84	23.39	0.45	1.9%	23.23
Total Waters Edge	111.97	108.00	3.97	3.7%	96.03	111.53	108.00	3.53	3.3%	96.03
	<u>195.68</u>	<u>194.10</u>	<u>1.58</u>	<u>0.8%</u>	<u>178.77</u>	<u>194.68</u>	<u>193.00</u>	<u>(2.31)</u>	<u>-1.2%</u>	<u>180.05</u>
Emergency Room Visits	1,281	1,507	(226)	-15.0%	1,399	2,638	2,930	(292)	-10.0%	2,751
Wound Care Clinic Visits	459	350	109	31.1%	96	905	700	205	29.3%	103
Outpatient Registrations	1,990	2,223	(233)	-10.5%	2,023	4,189	4,250	(61)	-1.4%	3,864
Surgery Cases:										
Inpatient	54	54	-	0.0%	48	90	94	(4)	-4.3%	83
Outpatient	120	143	(23)	-16.1%	132	255	234	21	9.0%	214
	<u>174</u>	<u>197</u>	<u>(23)</u>	<u>-11.7%</u>	<u>180</u>	<u>345</u>	<u>328</u>	<u>17</u>	<u>5.2%</u>	<u>297</u>
Adjusted Occupied Bed (AOB)	283.42	284.33	(0.90)	-0.3%	261.00	289.60	279.33	10.27	3.7%	193.06
Productive FTE	467.56	483.97	(16.41)	-3.4%	556.12	467.77	480.45	(12.68)	-2.6%	405.08
Total FTE	539.09	550.07	(10.99)	-2.0%	517.30	541.26	545.41	(4.15)	-0.8%	467.53
Productive FTE/Adj. Occ. Bed	1.65	1.70	(0.05)	-3.1%	2.13	1.62	1.72	(0.10)	-6.1%	2.10
Total FTE/ Adj. Occ. Bed	1.90	1.93	(0.03)	-1.7%	1.98	1.87	1.95	(0.08)	-4.3%	2.42

City of Alameda Health Care District
Statements of Financial Position
August 31, 2013

	<u>Current Month</u>	<u>Prior Month</u>	<u>Prior Year End</u>
Assets			
Current Assets:			
Cash and Cash Equivalents	\$ 5,200,500	\$ 6,439,805	\$ 4,861,959
Patient Accounts Receivable, net	10,807,792	10,902,164	12,041,516
Other Receivables	6,070,036	6,250,816	6,301,762
Third-Party Payer Settlement Receivables	-	-	-
Inventories	1,267,733	1,276,129	1,266,892
Prepays and Other	640,622	572,320	450,309
Total Current Assets	<u>23,986,684</u>	<u>25,441,235</u>	<u>24,922,439</u>
Assets Limited as to Use, net	212,549	200,778	189,755
Fixed Assets			
Land	877,945	877,945	877,945
Depreciable capital assets	45,505,551	45,495,434	45,422,895
Construction in progress	3,794,069	3,546,741	3,583,725
Depreciation	<u>(40,756,285)</u>	<u>(40,668,979)</u>	<u>(40,581,813)</u>
Property, Plant and Equipment, net	<u>9,421,280</u>	<u>9,251,141</u>	<u>9,302,752</u>
Total Assets	<u>\$ 33,620,512</u>	<u>\$ 34,893,153</u>	<u>\$ 34,414,946</u>
Liabilities and Net Assets			
Current Liabilities:			
Current Portion of Long Term Debt	\$ 2,326,007	\$ 2,326,007	\$ 826,007
Accounts Payable and Accrued Expenses	11,581,511	11,085,668	11,823,357
Payroll Related Accruals	4,608,312	5,444,798	5,195,271
Deferred Revenue	4,782,392	5,253,942	5,731,269
Employee Health Related Accruals	725,147	708,148	714,297
Third-Party Payer Settlement Payable	<u>3,738,204</u>	<u>3,771,493</u>	<u>3,796,593</u>
Total Current Liabilities	27,761,573	28,590,056	28,086,794
Long Term Debt, net	<u>1,869,120</u>	<u>1,926,176</u>	<u>1,578,289</u>
Total Liabilities	<u>29,630,693</u>	<u>30,516,232</u>	<u>29,665,083</u>
Net Assets:			
Unrestricted	3,567,271	3,966,143	4,350,108
Temporarily Restricted	<u>422,549</u>	<u>410,778</u>	<u>399,755</u>
Total Net Assets	<u>3,989,819</u>	<u>4,376,922</u>	<u>4,749,863</u>
Total Liabilities and Net Assets	<u>\$ 33,620,512</u>	<u>\$ 34,893,154</u>	<u>\$ 34,414,946</u>

City of Alameda Health Care District

Statements of Operations

August 31, 2013

\$'s in thousands

	Current Month					Year-to-Date				
	Actual	Budget	\$ Variance	% Variance	Prior Year	Actual	Budget	\$ Variance	% Variance	Prior Year
Patient Days	6,066	6,018	48	0.8%	5,542	12,070	11,966	104	0.9%	8,186
Discharges	215	261	(46)	-17.6%	231	447	510	(63)	-12.4%	460
ALOS (Average Length of Stay)	28.21	23.06	5.16	22.4%	23.99	27.00	23.45	3.55	15.1%	17.80
ADC (Average Daily Census)	195.7	194.1	1.55	0.8%	-	194.7	193.0	1.68	0.9%	132.0
CMI (Case Mix Index)	1.2611				1.4229	1.2936				1.3355
Revenues										
Gross Inpatient Revenues	\$ 18,245	\$ 19,091	\$ (846)	-4.4%	\$ 17,225	\$ 35,154	\$ 37,611	\$ (2,457)	-6.5%	\$ 31,389
Gross Outpatient Revenues	8,181	8,875	(693)	-7.8%	7,885	17,095	16,829	266	1.6%	14,458
Total Gross Revenues	26,426	27,966	(1,540)	-5.5%	25,110	52,250	54,440	(2,190)	-4.0%	45,847
Contractual Deductions	19,480	20,232	752	3.7%	15,852	38,950	39,319	370	0.9%	30,900
Bad Debts	775	1,102	326	29.6%	3,108	1,014	2,204	1,190	54.0%	3,925
Charity and Other Adjustments	159	133	(26)	-19.4%	122	297	267	(30)	-11.2%	246
Net Patient Revenues	6,011	6,498	(487)	-7.5%	6,029	11,990	12,650	(661)	-5.2%	10,775
Net Patient Revenue %	22.7%	23.2%			24.0%	22.9%	23.2%			23.5%
Net Clinic Revenue	91	88	4	4.4%	38	166	175	(9)	-5.1%	77
Other Operating Revenue	9	12	(4)	-29.5%	8	18	24	(6)	-25.1%	15
Total Revenues	6,111	6,598	(487)	-7.4%	6,075	12,174	12,850	(676)	-5.3%	10,867
Expenses										
Salaries	3,513	3,548	35	1.0%	3,323	7,098	7,028	(71)	-1.0%	6,330
Temporary Agency	166	180	14	7.7%	195	271	360	89	24.8%	349
Benefits	979	1,062	83	7.8%	1,005	1,882	2,104	223	10.6%	1,583
Professional Fees	491	501	10	2.0%	351	980	1,002	22	2.2%	686
Supplies	748	820	72	8.8%	808	1,529	1,576	47	3.0%	1,456
Purchased Services	543	571	29	5.0%	531	1,097	1,143	45	4.0%	990
Rents and Leases	239	221	(19)	-8.4%	214	472	442	(30)	-6.8%	329
Utilities and Telephone	70	83	14	16.2%	83	149	167	18	11.0%	150
Insurance	36	38	2	5.3%	46	74	76	2	2.6%	80
Depreciation and amortization	87	83	(5)	-5.7%	77	175	165	(10)	-5.8%	143
Other Operating Expenses	129	126	(4)	-2.9%	88	217	236	19	8.0%	170
Total Expenses	7,002	7,233	231	3.2%	6,723	13,944	14,299	355	2.5%	12,267
Operating gain (loss)	(891)	(635)	(256)	-40.3%	(648)	(1,771)	(1,450)	(321)	22.1%	(1,400)
Non-Operating Income / (Expense)										
Parcel Taxes	477	487	(10)	-2.0%	477	954	974	(20)	-2.0%	954
Investment Income	1	-	1	0.0%	1	2	-	2	0.0%	3
Interest Expense	(15)	(16)	1	7.0%	(18)	(25)	(31)	6	-20.1%	(27)
Other Income / (Expense)	28	43	(14)	-33.9%	27	56	85	(29)	-33.9%	55
Net Non-Operating Income / (Expense)	492	514	(22)	-4.3%	488	988	1,028	(40)	-3.9%	985
Excess of Revenues Over Expenses	\$ (399)	\$ (121)	\$ (278)	229.9%	\$ (159)	\$ (783)	\$ (422)	\$ (361)	85.4%	\$ (415)

City of Alameda Health Care District
Statements of Operations - Per Adjusted Patient Day
August 31, 2013

	Current Month					Year-to-Date				
	Actual	Budget	\$ Variance	% Variance	Prior Year	Actual	Budget	\$ Variance	% Variance	Prior Year
Revenues										
Gross Inpatient Revenues	\$ 2,077	\$ 2,166	\$ (89)	-4.1%	\$ 2,132	\$ 1,960	\$ 2,172	\$ (212)	-9.8%	\$ 2,625
Gross Outpatient Revenues	931	1,007	(76)	-7.5%	976	953	972	(19)	-1.9%	1,209
Total Gross Revenues	3,008	3,172	(165)	-5.2%	3,108	2,913	3,143	(231)	-7.3%	3,834
Contractual Deductions	2,217	2,295	78	3.4%	1,962	2,171	2,270	99	4.4%	2,584
Bad Debts	88	125	37	29.4%	385	57	127	71	55.6%	328
Charity and Other Adjustments	18	15	(3)	-19.8%	15	17	15	(1)	-7.4%	21
Net Patient Revenues	684	737	(53)	-7.2%	746	668	730	(62)	-8.5%	901
Net Patient Revenue %	22.7%	23.2%			24.0%	22.9%	23.2%			23.5%
Net Clinic Revenue	10	10	0	4.8%	5	9	10	(1)	-8.3%	6
Other Operating Revenue	1	1	(0)	-29.2%	1	1	1	(0)	-27.7%	1
Total Revenues	696	748	(53)	-7.1%	752	679	742	(63)	-8.5%	909
Expenses										
Salaries	400	403	3	0.7%	411	396	406	10	2.5%	529
Temporary Agency	19	20	2	7.4%	24	15	21	6	27.4%	29
Benefits	111	120	9	7.5%	124	98	122	24	19.4%	132
Professional Fees	56	57	1	1.6%	43	55	58	3	5.6%	57
Supplies	85	93	8	8.5%	100	85	91	6	6.3%	122
Purchased Services	62	65	3	4.7%	66	61	66	5	7.3%	83
Rents and Leases	27	25	(2)	-8.8%	27	26	26	(1)	-3.1%	28
Utilities and Telephone	8	9	2	15.9%	10	8	10	1	14.1%	13
Insurance	4	4	0	5.0%	6	4	4	0	5.9%	7
Depreciation and Amortization	10	9	(1)	-6.0%	10	10	10	(0)	-2.2%	12
Other Operating Expenses	15	14	(0)	-3.2%	11	12	14	2	11.2%	14
Total Expenses	797	820	24	2.9%	832	770	826	55	6.7%	1,026
Operating Gain / (Loss)	(101)	(72)	(29)	-40.8%	(80)	(91)	(83)	(8)	9.6%	(117)
Non-Operating Income / (Expense)										
Parcel Taxes	54	55	(1)	-1.7%	59	53	56	(3)	-5.4%	80
Investment Income	0	-	0	0.0%	0	0	-	0	0.0%	0
Interest Expense	(2)	(2)	0	6.7%	(2)	(1)	(2)	0	-22.8%	(2)
Other Income / (Expense)	3	5	(2)	-33.6%	3	3	5	(2)	-36.2%	5
Net Non-Operating Income / (Expense)	56	58	(2)	-4.0%	60	55	59	(4)	-7.2%	82
Excess of Revenues Over Expenses	\$ (45)	\$ (14)	\$ (32)	231.0%	\$ (20)	\$ (36)	\$ (24)	\$ (12)	50.8%	\$ (35)

Wound Care - Statement of Operations
August 31, 2013

	Current Month				Year-to-Date			
	Actual	Budget	Variance	%	Actual	Budget	Variance	%
Clinic Visits	459	350	109	31.1%	905	700	205	29.3%
Revenue								
Gross Revenue	974,819	689,761	285,058	41.3%	1,941,725	1,379,522	562,203	40.8%
Deductions from Revenue	<u>758,409</u>	<u>531,392</u>	<u>227,017</u>		<u>1,512,596</u>	<u>1,062,784</u>	<u>449,812</u>	
Net Revenue	<u>216,410</u>	<u>158,369</u>	<u>58,041</u>	36.6%	<u>429,129</u>	<u>316,738</u>	<u>112,391</u>	
Expenses								
Salaries	24,712	15,775	(8,937)	-56.7%	43,321	31,673	(11,648)	-36.8%
Benefits	7,913	4,712	(3,201)	-67.9%	12,591	9,461	(3,130)	-33.1%
Professional Fees	93,000	73,306	(19,694)	-26.9%	188,935	146,612	(42,323)	-28.9%
Supplies	41,865	28,239	(13,626)	-48.3%	72,472	56,478	(15,994)	-28.3%
Purchased Services	5,597	4,000	(1,597)	-39.9%	10,190	8,000	(2,190)	-27.4%
Rents and Leases	5,686	5,686	-	0.0%	11,809	11,372	(437)	-3.8%
Depreciation	8,834	8,685	(149)	-1.7%	17,668	17,370	(298)	-1.7%
Other	4,089	2,079	(2,010)	-96.7%	5,795	4,158	(1,637)	-39.4%
Total Expenses	<u>191,696</u>	<u>142,482</u>	<u>(49,214)</u>	-34.5%	<u>362,781</u>	<u>285,124</u>	<u>(77,657)</u>	-27.2%
Excess of Revenue over Expenses	<u>24,714</u>	<u>15,887</u>	<u>8,827</u>	55.6%	<u>66,348</u>	<u>31,615</u>	<u>34,734</u>	109.9%

City of Alameda Health Care District
Waters Edge Skilled Nursing - Statement of Operations
August 31, 2013

	Current Month				Year-to-Date			
	<u>Actual</u>	<u>Budget</u>	<u>Variance</u>	<u>%</u>	<u>Actual</u>	<u>Budget</u>	<u>Variance</u>	<u>%</u>
Patient Days								
Medicare	376	502	(126)	-25.1%	754	1,004	(250)	-24.9%
Medi-Cal	2,961	2,576	385	14.9%	5,962	5,152	810	15.7%
Managed Care	4	68	(64)	-94.1%	47	136	(89)	-65.4%
Self Pay/Other	130	202	(72)	-35.6%	140	404	(264)	-65.3%
Total	<u>3,471</u>	<u>3,348</u>	<u>123</u>	<u>3.7%</u>	<u>6,903</u>	<u>6,696</u>	<u>207</u>	<u>3.1%</u>
Revenue								
Routine Revenue	2,767,982	2,613,836	154,146	5.9%	5,499,398	5,227,672	271,726	5.2%
Ancillary Revenue	402,111	293,277	108,834	37.1%	822,436	579,753	242,683	41.9%
Total Gross Revenue	<u>3,170,093</u>	<u>2,907,113</u>	<u>262,980</u>	<u>9.0%</u>	<u>6,321,834</u>	<u>5,807,425</u>	<u>514,409</u>	<u>8.9%</u>
Deductions from Revenue	<u>1,827,238</u>	<u>1,674,497</u>	<u>(152,741)</u>	<u>-9.1%</u>	<u>3,740,310</u>	<u>3,345,077</u>	<u>(395,233)</u>	<u>-11.8%</u>
Net Revenue	<u>1,342,855</u>	<u>1,232,616</u>	<u>110,239</u>	<u>8.9%</u>	<u>2,581,524</u>	<u>2,462,348</u>	<u>119,176</u>	<u>4.8%</u>
Expenses								
Salaries	440,757	478,078	37,321	7.8%	908,034	952,643	44,609	4.7%
Temporary Agency	32,195	20,067	(12,128)	-100.0%	44,398	40,134	(4,264)	-100.0%
Benefits	96,087	97,576	1,489	1.5%	194,786	194,883	98	0.1%
Professional Fees	4,712	5,200	488	9.4%	5,605	10,400	4,795	46.1%
Supplies	75,600	63,380	(12,220)	-19.3%	142,845	126,761	(16,084)	-12.7%
Purchased Services	135,351	129,300	(6,051)	-4.7%	255,289	258,600	3,311	1.3%
Rents and Leases	78,383	75,400	(2,983)	-4.0%	155,426	150,800	(4,626)	-3.1%
Utilities	2,369	11,767	9,398	79.9%	14,576	23,534	8,958	38.1%
Insurance	-	2,392	2,392	100.0%	-	4,784	4,784	100.0%
Other	5,794	16,308	10,514	64.5%	18,038	32,616	14,578	44.7%
Total Expenses	<u>871,248</u>	<u>899,468</u>	<u>28,220</u>	<u>3.1%</u>	<u>1,738,997</u>	<u>1,795,155</u>	<u>56,159</u>	<u>3.1%</u>
Excess of Revenue over Expenses	<u>471,607</u>	<u>333,148</u>	<u>138,459</u>		<u>842,527</u>	<u>667,193</u>	<u>175,334</u>	

City of Alameda Health Care District
Orthopedic Clinic - Statement of Operations
August 31, 2013

	Current Month				Year-to-Date			
	<u>Actual</u>	<u>Budget</u>	<u>Variance</u>	<u>%</u>	<u>Actual</u>	<u>Budget</u>	<u>Variance</u>	<u>%</u>
Clinic Visits	283	302	(19)	-6.3%	543	604	(61)	-10.1%
Revenue								
Gross Revenue	82,814	128,652	(45,838)	-35.6%	175,290	257,304	(82,014)	-31.9%
Deductions from Revenue	<u>45,269</u>	<u>90,069</u>	<u>(44,800)</u>		<u>95,770</u>	<u>180,138</u>	<u>(84,368)</u>	
Net Revenue	<u>37,545</u>	<u>38,583</u>	<u>(1,038)</u>		<u>79,520</u>	<u>77,166</u>	<u>2,354</u>	
Expenses								
Salaries	32,684	32,905	221	0.7%	65,086	65,808	722	1.1%
Benefits	8,217	9,829	1,612	16.4%	16,363	19,657	3,294	16.8%
Professional Fees	25,823	25,000	(823)	-3.3%	50,400	50,000	(400)	-0.8%
Supplies	994	3,467	2,473	71.3%	2,287	6,934	4,647	67.0%
Purchased Services	5,734	6,083	349	5.7%	10,016	12,166	2,150	17.7%
Rents and Leases	4,660	4,667	7	0.1%	9,320	9,334	14	0.1%
Depreciation	-	-	-	0.0%	-	-	-	0.0%
Other	4,359	2,608	(1,751)	-67.1%	5,408	5,216	(192)	-3.7%
Total Expenses	<u>82,471</u>	<u>84,559</u>	<u>2,088</u>	<u>2.5%</u>	<u>158,880</u>	<u>169,115</u>	<u>10,235</u>	<u>6.1%</u>
Excess of Revenue over Expenses	<u>(44,926)</u>	<u>(45,976)</u>	<u>1,050</u>	<u>2.3%</u>	<u>(79,360)</u>	<u>(91,949)</u>	<u>12,589</u>	<u>13.7%</u>
<u>Hospital Based Activity:</u>								
Inpatient Days	12	22	(10)	-45.5%	37	44	(7)	-15.9%
Inpatient Surgeries	2	5	(3)	-60.0%	4	10	(6)	-60.0%
Outpatient Surgeries	7	9	(2)	-22.2%	13	18	(5)	-27.8%
Therapy Referred Visits	153	175	(22)	-12.6%	383	350	33	9.4%
Imaging Referred Procedures	120	110	10	9.1%	248	220	28	12.7%
Inpatient Gross Charges	246,668	309,500	(62,832)	-20.3%	672,905	619,000	53,905	8.7%
Inpatient Net Revenue	<u>37,109</u>	<u>69,500</u>	<u>(32,391)</u>	<u>-46.6%</u>	<u>78,324</u>	<u>139,000</u>	<u>(60,676)</u>	<u>-43.7%</u>
Outpatient Gross Charges	340,487	324,775	15,712	4.8%	842,315	630,530	211,785	33.6%
Outpatient Net Revenue	<u>57,883</u>	<u>70,885</u>	<u>(13,002)</u>	<u>-18.3%</u>	<u>128,139</u>	<u>137,778</u>	<u>(9,639)</u>	<u>-7.0%</u>
Total Gross Charges	<u>587,155</u>	<u>634,275</u>	<u>(47,120)</u>	<u>-7.4%</u>	<u>1,515,220</u>	<u>1,249,530</u>	<u>265,690</u>	<u>21.3%</u>
Total Net Revenue	<u>94,992</u>	<u>140,385</u>	<u>(45,393)</u>	<u>-32.3%</u>	<u>206,463</u>	<u>276,778</u>	<u>(70,315)</u>	<u>-25.4%</u>

City of Alameda Health Care District
1206b Clinic - Statement of Operations
August 31, 2013

	Current Month				Year-to-Date			
	<u>Actual</u>	<u>Budget</u>	<u>Variance</u>	<u>%</u>	<u>Actual</u>	<u>Budget</u>	<u>Variance</u>	<u>%</u>
Clinic Visits								
Primary Care	119	138	(19)		221	276	(55)	
Surgery	63	53	10		126	106	20	
Neurology	30	31	(1)		58	62	(4)	
Total Visits	<u>212</u>	<u>222</u>	<u>(10)</u>	-4.5%	<u>405</u>	<u>444</u>	<u>(39)</u>	-8.8%
Revenue								
Gross Revenue	121,454	129,400	(7,946)	-6.1%	195,082	258,800	(63,718)	-24.6%
Deductions from Revenue	<u>67,642</u>	<u>77,650</u>	<u>(10,008)</u>		<u>108,476</u>	<u>155,300</u>	<u>(46,824)</u>	
Net Revenue	<u>53,812</u>	<u>51,750</u>	<u>2,062</u>		<u>86,606</u>	<u>103,500</u>	<u>(16,894)</u>	
Expenses								
Salaries	32,362	32,526	164	0.5%	64,031	57,504	(6,527)	-11.4%
Temporary Agency	-	-	-	-100.0%	-	-	-	-100.0%
Benefits	8,136	9,716	1,580	16.3%	16,097	17,176	1,079	6.3%
Professional Fees	24,834	18,000	(6,834)	-38.0%	28,608	36,000	7,392	20.5%
Supplies	731	1,356	625	46.1%	7,298	2,712	(4,586)	-169.1%
Purchased Services	7,346	6,468	(878)	-13.6%	15,421	12,936	(2,485)	-19.2%
Rents and Leases	15,194	12,661	(2,533)	-20.0%	30,388	25,322	(5,066)	-20.0%
Depreciation	494	182	(312)	-171.4%	988	364	(624)	-171.4%
Other	<u>11,077</u>	<u>5,167</u>	<u>(5,910)</u>	<u>-114.4%</u>	<u>17,171</u>	<u>10,334</u>	<u>(6,837)</u>	<u>-66.2%</u>
Total Expenses	<u>100,174</u>	<u>86,076</u>	<u>(14,098)</u>	<u>-16.4%</u>	<u>180,002</u>	<u>162,348</u>	<u>(17,654)</u>	<u>-10.9%</u>
Excess of Revenue over Expenses	<u>(46,362)</u>	<u>(34,326)</u>	<u>(12,036)</u>	35.1%	<u>(93,396)</u>	<u>(58,848)</u>	<u>(34,548)</u>	58.7%

Note:

Clinic Hours by Physician

Dr. Celada - M,W,F Mornings only

Dr. Brimer - M & Th full days, plus T Mornings

Dr. Dutaret - T & W full days

City of Alameda Health Care District
Statement of Cash Flows
For the Two Months Ended August 31, 2013

	<u>Current Month</u>	<u>Year-to-Date</u>
Cash flows from operating activities		
Net Income / (Loss)	\$ (398,874)	\$ (782,839)
Items not requiring the use of cash:		
Depreciation and amortization	87,306	\$ 174,883
Write-off of Kaiser liability	-	\$ -
Changes in certain assets and liabilities:		
Patient accounts receivable, net	94,372	1,233,724
Other Receivables	180,780	231,726
Third-Party Payer Settlements Receivable	(33,289)	(58,389)
Inventories	8,396	(841)
Prepays and Other	(68,301)	(190,312)
Accounts payable and accrued liabilities	495,843	(241,846)
Payroll Related Accruals	(836,486)	(586,959)
Employee Health Plan Accruals	16,999	10,850
Deferred Revenues	(471,550)	(948,877)
Cash provided by (used in) operating activities	<u>(924,805)</u>	<u>(1,158,880)</u>
Cash flows from investing activities		
(Increase) Decrease in Assets Limited As to Use	(11,771)	(22,794)
Additions to Property, Plant and Equipment	(257,445)	(293,410)
Other	1	1
Cash provided by (used in) investing activities	<u>(269,214)</u>	<u>(316,203)</u>
Cash flows from financing activities		
Net Change in Long-Term Debt	(57,056)	1,790,831
Net Change in Restricted Funds	11,770	22,794
Cash provided by (used in) financing and fundraising activities	<u>(45,286)</u>	<u>1,813,624</u>
Net increase (decrease) in cash and cash equivalents	(1,239,305)	338,541
Cash and cash equivalents at beginning of period	6,439,805	4,861,959
Cash and cash equivalents at end of period	<u>\$ 5,200,502</u>	<u>\$ 5,200,501</u>

**City of Alameda Health Care District
Ratio's Comparison**

Financial Ratios	<u>Audited Results</u>			<u>Unaudited</u>	<u>YTD</u>
	FY 2010	FY 2011	FY 2012	FY 2013	8/31/2013
<u>Profitability Ratios</u>					
Net Patient Revenue (%)	24.16%	23.58%	22.90%	23.34%	22.95%
Earnings Before Depreciation, Interest, Taxes and Amortization (EBITA)	4.82%	-1.01%	-1.48%	-1.48%	-1.48%
EBIDAP ^{Note 5}	-3.66%	-13.41%	-11.22%	-9.39%	-12.63%
Total Margin	2.74%	-2.61%	-3.21%	-3.13%	-6.43%
<u>Liquidity Ratios</u>					
Current Ratio	1.23	1.05	0.96	0.89	0.86
Days in accounts receivable ,net	51.83	46.03	55.21	60.35	55.89
Days cash on hand (with restricted)	21.6	14.1	17.7	21.8	24.2
<u>Debt Ratios</u>					
Cash to Debt	249.0%	123.3%	123.56%	210.11%	129.03%
Average pay period (includes payroll)	57.11	62.68	72.94	78.69	76.03
Debt service coverage	5.98	(0.70)	(0.53)	(1.21)	(0.25)
Long-term debt to fund balance	0.14	0.18	0.28	0.33	0.51
Return on fund balance	18.87%	-19.21%	-27.35%	-48.16%	-19.62%
Debt to number of beds	10,482	11,515	16,978	9,728	9,728

**City of Alameda Health Care District
Ratio's Comparison**

Financial Ratios	Audited Results			Unaudited	YTD
	FY 2010	FY 2011	FY 2012	FY 2013	8/31/2013
Patient Care Information					
Bed Capacity	161	161	161	281	281
Patient days(all services)	30,607	30,270	30,448	66,645	12,070
Patient days (acute only)	10,579	10,443	10,880	11,559	1,585
Discharges(acute only)	2,802	2,527	2,799	2,838	417
Average length of stay (acute only)	3.78	4.13	3.89	4.07	3.80
Average daily patients (all sources)	83.85	82.93	83.19	182.59	194.68
Occupancy rate (all sources)	52.08%	51.51%	51.67%	64.98%	69.28%
Average length of stay	3.78	4.13	3.89	4.07	3.80
Emergency Visits	17,624	16,816	16,964	17,175	2,638
Emergency visits per day	48.28	46.07	46.35	47.05	42.55
Outpatient registrations per day ^{Note 1}	79.67	65.19	60.67	64.07	67.56
Surgeries per day - Total	13.46	6.12	6.12	5.52	5.56
Surgeries per day - excludes Kaiser	5.32	6.12	6.12	5.52	5.56

Notes:

1. Includes Kaiser Outpatient Sugercial volume in Fiscal Years 2008, 2009 and through March 31, 2010.
2. In addition to these general requirements a feasibility report will be required.
3. Based upon Moody's FY 2008 preliminary single-state provider medians.
4. EBIDA - Earnings before Interest, Depreciation and Amoritzation
5. EBIDAP - Earnings before Interest, Depreciation and Amortization and Parcel Tax Proceeds

Glossary of Financial Ratios

Term	What is it? Why is it Important?	How is it calculated?
EBIDA	A measure of the organization's cash flow	Earnings before interest, depreciation, and amortization (EBIDA)
Operating Margin	Income derived from patient care operations	Total operating revenue less total operating expense divided by total operating revenue
Current Ratio	The number of dollars held in current assets per dollar of liabilities. A widely used measure of liquidity. An increase in this ratio is a positive trend.	Current assets divided by current liabilities
Days cash on hand	Measures the number of days of average cash expenses that the hospital maintains in cash or marketable securities. It is a measure of total liquidity, both short-term and long-term. An increasing trend is positive.	Cash plus short-term investments plus unrestricted long-term investments over total expenses less depreciation divided by 365.
Cash to debt	Measures the amount of cash available to service debt.	Cash plus investments plus limited use investments divided by the current portion and long-term portion of the organization's debt instruments.
Debt service coverage	Measures total debt service coverage (interest plus principal) against annual funds available to pay debt service. Does not take into account positive or negative cash flow associated with balance sheet changes (e.g. work down of accounts receivable). Higher values indicate better debt repayment ability.	Excess of revenues over expenses plus depreciation plus interest expense over principal payments plus interest expense.
Long-term debt to fund balance	Higher values for this ratio imply a greater reliance on debt financing and may imply a reduced ability to carry additional debt. A declining trend is positive.	Long-term debt divided by long-term debt plus unrestricted net assets.