

# North Carolina Hospital Community Benefits Report

Hospital Name	Carolinas HealthCare System NorthEast
Time Period	FY 2018
Community Benefits	
A. Estimated Costs of Treating <b>Charity Care</b> Patients*	160,374,852
B. Estimated unreimbursed costs of treating <b>Medicare</b> patients*	447,546,158
C. Includes an adjustment in this period's Medicare revenues for extraordinary adjustments <sup>1</sup> of:	0
D. Without this Medicare adjustment, Medicare losses would have been (B + C):	447,546,158
E. Estimated unreimbursed costs of treating <b>Medicaid</b> patients*	264,577,558
F. Includes an adjustment in this period's Medicaid revenues for extraordinary adjustments <sup>1</sup> of:	0
G. Without this Medicaid adjustment, Medicaid losses would have been (E + F):	264,577,558
H. Estimated unreimbursed costs of treating patients from <b>other means-tested government programs</b> *	0
I. Includes an adjustment in this period's other means-tested government program revenues for extraordinary adjustments <sup>1</sup> of:	0
J. Without this adjustment, other means-tested gov. program losses would have been (H + I):	0
K. <b>Community health improvement services &amp; community benefit operations</b>	8,383,244
L. <b>Health professions education</b>	45,975,075
M. <b>Subsidized health services</b> <sup>2</sup>	9,302,765
N. <b>Research costs</b>	22,892,699

<b>O. Cash and in-kind contributions</b> to community groups	14,241,711
<b>P. Community Building Activities</b> <sup>3</sup>	214,748
<b>Q. Total Community Benefits</b> <sup>1</sup> <b>with Settlements and Extraordinary Adjustments</b> (A + B + E + H + K + L + M + N + O + P)	<b>973,508,810</b>
<b>R. Total Community Benefits</b> <sup>1</sup> <b>without Settlements and Extraordinary Adjustments</b> (A + D + G + J + K + L + M + N + O + P)	<b>973,508,810</b>
Bad Debt Costs	
<b>S. Estimated costs of treating bad debt patients*</b>	<b>260,863,569</b>

Notes:

(1) *Notes about prior period adjustments*

(2) *Notes about Subsidized health services*

(3) *Notes about Community building activities*

Additional Information:

*Additional support received for any community benefit activities.  
These amounts have not been netted from Total Community Benefits.*

*URL with additional information about this community benefits report*

Other Notes

The community benefit information disclosed above represents Atrium Health consolidated hospitals and is not specific to CHS NorthEast.

**\* Footnotes:**

The costing methodology or source used to determine payer costs is:

- \_\_\_\_\_ The ANDI methodology, which uses a facility-wide ratio of cost to charges as described in NCHA Community Benefits Guidelines.
- \_\_\_\_\_ An internal cost accounting system, adjusted for community benefit reporting.
- \_\_\_\_\_ An internal cost accounting system, adjusted for community benefit reporting, for all items except bad debt and charity care, which use in internal cost-to-charge ratio approach that is based on the methodology specified in the NCHA Community Benefits Guidelines.
- X** An internal cost-to-charge ratio approach that is based on the methodology specified in the NCHA Community Benefits Guidelines.

All costing methodologies do not double-count expenses reported in other community benefit items. For example, amounts reported in Subsidized Health Services do not also appear in Medicaid losses.

*Last modified on July 1, 2019 9:18 AM*