North Carolina Hospital Community Benefits Report

| Hospital Name | Davie County Hospital |
|---|-----------------------------|
| Time Period | FY 2018 |
| Community Benefits | |
| A. Estimated Costs of Treating Charity Care Patients* | \$1,167,597 |
| B. Estimated unreimbursed costs of treating Medicare patients* | \$2,195,171 |
| C. Includes an adjustment in this period's Medicare revenues for extraordinary adjustments of: | -\$49,516 |
| D. Without this Medicare adjustment, Medicare losses would have been (B + C): | \$2,145,655 |
| E. Estimated unreimbursed costs of treating Medicaid patients* | \$1,559,915 |
| F. Includes an adjustment in this period's Medicaid revenues for extraordinary adjustments 1 of: | -\$1,022,141 |
| G. Without this Medicaid adjustment, Medicaid losses would have been $(E + F)$: | \$537,774 |
| H. Estimated unreimbursed costs of treating patients from other means-tested government programs * | \$167,123 |
| I. Includes an adjustment in this period's other meanstested government program revenues for extraordinary adjustments ¹ of: | \$0 |
| J. Without this adjustment, other means-tested gov. program losses would have been (H + I): | \$167,123 |
| K. Community health improvement services & community benefit operations | \$0 |
| L. Health professions education | \$0 |
| $M.$ Subsidized health services 2 | \$0 |
| N. Research costs | \$0 |
| O. Cash and in-kind contributions to community groups | \$27,279 |

| Q. Total Community Benefits ¹ with Settlements | |
|---|--------------------|
| and Extraordinary Adjustments | \$5,117,085 |
| (A + B + E + H + K + L + M + N + O + P) | |

R. Total Community Benefits¹ without Settlements and Extraordinary Adjustments (A + D + G + J + K + L + M + N + O + P)

\$4,045,428

Bad Debt Costs

S. Estimated costs of treating bad debt patients*

\$1,263,118

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

* 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