

North Carolina Hospital Community Benefits Report

| Hospital Name | North Carolina Baptist Hospital |
|--|---------------------------------|
| Time Period | FY 2018 |
| Community Benefits | |
| A. Estimated Costs of Treating Charity Care Patients* | 41789603 |
| B. Estimated unreimbursed costs of treating Medicare patients* | 119459557 |
| C. Includes an adjustment in this period's Medicare revenues for extraordinary adjustments ¹ of: | 0 |
| D. Without this Medicare adjustment, Medicare losses would have been (B + C): | 119459557 |
| E. Estimated unreimbursed costs of treating Medicaid patients* | 14090139 |
| F. Includes an adjustment in this period's Medicaid revenues for extraordinary adjustments ¹ of: | 0 |
| G. Without this Medicaid adjustment, Medicaid losses would have been (E + F): | 14090139 |
| H. Estimated unreimbursed costs of treating patients from other means-tested government programs * | 15125681 |
| I. Includes an adjustment in this period's other means-tested government program revenues for extraordinary adjustments ¹ of: | 0 |
| J. Without this adjustment, other means-tested gov. program losses would have been (H + I): | 15125681 |
| K. Community health improvement services & community benefit operations | 5160770 |
| L. Health professions education | 81233059 |
| M. Subsidized health services ² | 6694997 |
| N. Research costs | 0 |

| | |
|--|------------------|
| O. Cash and in-kind contributions to community groups | 2546675 |
| P. Community Building Activities ³ | 1067054 |
| Q. Total Community Benefits¹ with Settlements and Extraordinary Adjustments (A + B + E + H + K + L + M + N + O + P) | 287167535 |
| R. Total Community Benefits¹ without Settlements and Extraordinary Adjustments (A + D + G + J + K + L + M + N + O + P) | 287167535 |
| Bad Debt Costs | |
| S. Estimated costs of treating bad debt patients* | 34035356 |

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