## North Carolina Hospital Community Benefits Report

<table>
<thead>
<tr>
<th>Hospital Name</th>
<th>UNC Hospitals</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Time Period</strong></td>
<td>FY 2018</td>
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</table>

### Community Benefits

A. Estimated Costs of Treating **Charity Care** Patients* $75,371,182

B. Estimated unreimbursed costs of treating **Medicare** patients* $67,159,865

C. Includes an adjustment in this period's Medicare revenues for extraordinary adjustments\(^1\) of: $10,832,867

D. Without this Medicare adjustment, Medicare losses would have been (B + C): $77,992,732

E. Estimated unreimbursed costs of treating **Medicaid** patients* -$12,739,067

F. Includes an adjustment in this period's Medicaid revenues for extraordinary adjustments\(^1\) of: -$647,733

G. Without this Medicaid adjustment, Medicaid losses would have been (E + F): -$13,386,800

H. Estimated unreimbursed costs of treating patients from **other means-tested government programs*** $0

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): $0

K. **Community health improvement services & community benefit operations** $0

L. **Health professions education** $58,380,902

M. **Subsidized health services**\(^2\) $0

N. **Research costs** $0

O. **Cash and in-kind contributions** to community groups $0

P. **Community Building Activities**\(^3\) $0
### Q. Total Community Benefits\(^1\) with Settlements and Extraordinary Adjustments

\[ (A + B + E + H + K + L + M + N + O + P) \]

\[ \$188,172,882 \]

### R. Total Community Benefits\(^1\) without Settlements and Extraordinary Adjustments

\[ (A + D + G + J + K + L + M + N + O + P) \]

\[ \$198,358,016 \]

### Bad Debt Costs

**S. Estimated costs of treating bad debt patients\(^*\)**

\[ \$30,574,822 \]

### 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.*

\[ \$0 \]

*URL with additional information about this community benefits report not available*

### Other Notes

### Footnotes:

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

- **X** 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.

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